





Digitized by the Internet Archive  
in 2014

<https://archive.org/details/b19974760M5640>

# CHEMIST & DRUGGIST

The newsweekly for pharmacy

March 10, 1984

a Benn publication

Independent  
wholesalers  
put case for  
survival

Sunday trade  
would affect  
small shops

First NPA  
training  
certificates

Withdrawal of  
phenylbutazone

Looking for a  
contract with  
a future

Computers:  
kangaroo  
and chips

C&D quarterly  
business  
statistics

## Sales rocket!

- \* Our bubbly new TV ad pushed 1983 sales up 52%\* in chemists.
- \* Countdown to Easter holidays: new TV burst starts April 7th!
- \* Make space for more Matey, Miss Matey and new M8E now!



\*Source: Independent Consumer Research







# CHEMIST DRUGGIST

Incorporating Retail Chemist

## CONTENTS

March 10, 1984  
Volume 221 No 5410  
125th year of publication  
ISSN 0009-3033  
**Editor/Publisher:**  
Ronald Salmon MPS  
**Deputy Editor:**  
John Skelton BPharm, MPS  
**Beauty Editor:**  
Liz Platts BA  
**Technical Editor:**  
Patrick Grice BPharm, MPS  
**Contributing Editor:**  
Adrienne deMont BPharm, MPS  
**Editorial Assistants:**  
Paul Slade BA  
Steven Titmarsh BPharm, MPS  
**Art Editor:** John Clement  
**Price List Controller:** Colin Simpson  
**Director:** James Lear  
**Advertisement Manager:** Peter Nicholls JP  
**Assistant Advertisement Manager:**  
Doug Mytton  
**Production:** Shirley Wilson  
**Published Saturdays**  
**by Benn Publications Ltd**  
Sovereign Way, Tonbridge, Kent TN9 1RW  
Telephone: 0732 364422 Telex: 95132  
**Subscriptions:**  
Home £46 per annum  
Overseas & Eire £60 per annum  
including postage

**ABC** Member of the Audit  
Bureau of Circulations

**Regional advertisement offices:**  
Midlands: 240-244 Stratford Road, Shirley,  
Solehill, W Midlands B90 3AE  
021 744 4427  
North East and North West  
491 Chester Road, Old Trafford  
Manchester M16 9HF 061-872 5151  
West Country & South Wales  
10 Badminton Road, Downend, Bristol  
BS16 6BQ 0272 564827

**Benn**

### Survival case for independent wholesalers

Onward Group to petition MoH and lobby MPs

436

### Phenylbutazone to be withdrawn

Problems ahead with this generic?

437

### Leap year '84 and pharmacy

In-fighting down in the swamp

457

### A contract with a future

Kenneth Sims starts his search

458

### Computers in pharmacy

Kangaroo and chips

471

### First NPA training certificates

Success for three assistants in Truro pharmacy

478

### Sunday trade would affect small shops

Retail consortium says most traders favour control

479

Topical reflections by Xrayser	440	Business news	479
Counterpoints	443	C&D's business statistics	481
Prescription specialities	455	Coming events	482
PSGB Statutory Committee	464	Classified advertisements	483
Letters	474, 476, 477	People	486

## COMMENT

Many independent wholesalers are in a precarious position. They are making well under 1 per cent profit on turnover — insufficient to maintain stock and service levels or to invest in today's technology. And where does even the 1 per cent come from? From the prompt payment terms offered by manufacturers!

That frightening picture is painted in a document prepared by the Onward Group (p436), with which it is hoped to persuade MPs and Ministers that the time has come for Government action in the interest of the patient. Onward represents 12 of the country's independents, many of them still family-owned, which believe they have a special place in pharmaceutical distribution.

So the document is certainly self-interest, but many independent (and small multiple?) pharmacists may be willing to support their proposed petition once they recognise the

implications for themselves. It depends upon the individual's attitude and geographic location of course, particularly as to whether he or she believes that a second-string wholesaler is required — how many, for example, are prepared to accept that when their one wholesaler is out of stock, the patient must go without?

Certainly the UK map provided by Onward as part of their campaign shows clearly where the loss of an independent would leave pharmacies with no tenable support service — and in just one or two cases, no prompt first-line service either. Parts of East Anglia and Lincolnshire are many miles from a national wholesaler, for example, and independents are the only ones found in the west of Northern Ireland.

Some of Onward's statistics are also worth noting: over 60 depots closed in the past few years, average stockholding of the independents reduced by 30 per cent in the

past three years; £1 m spent by independents over the past four years in instituting high technology for stock control etc, and a capital loss of £187,426 among group members from DHSS cuts.

But whether cures for these ills would work, is another matter. The national wholesalers have fought their battles through scale (allowing more support services to be offered) and through efficiency (permitting higher discounts). Increasing their margins would therefore not necessarily benefit the independents.

Some years ago it was predicted that the future lay with low-price, low-cost main distributors, backed by full-service wholesalers prepared to deliver anywhere anytime — for an extra fee that could be reimbursed by the NHS. Now if the Government could be persuaded to accept that...

# Wholesalers put case for survival

**Some independent wholesalers claim to be surviving only on prompt payment discounts offered by manufacturers. They are calling on the Government to secure their service to the community through action on uncontrolled discounts and parallel imports.**

The Onward Group of independent wholesalers is campaigning to draw the attention of MPs and Government to the problems facing the pharmaceutical distribution service.

Selected MPs and members of the Social Services Select Committee are being sent a document — "The case for existence" — which sets out the need to ensure the survival of independent wholesalers. Over the next few weeks Onward Group members will be asking their pharmacist customers to complete a petition to provide statements of support on the service they offered. These will be sent to the Health Minister, Kenneth Clarke.

Despite requests he has so far failed to meet the Group, who fear that decisions shortly to be taken will be based on insufficient awareness of the problems they face.

Campaign chairman Mr Hugh Butler, of E. H. Butler & Sons, Leicester, emphasises the Group is backing up the NAPD and PSNC. "We felt that as independents we could say some things a bit more forcefully than might otherwise be possible. Like wholesalers in general we see that the present state of unrestricted accounts cannot be allowed to continue. If the Government do interfere we want to make sure they do it sensibly."

So far 16 local radio stations and BBC Radio 4's Today programme have carried items on the situation.

The document being circulated to MPs cites the service offered by independent wholesalers, "particularly to rural areas and smaller community pharmacies, which is not available from the large national distributors". This service is now at risk, claim the Onward Group.

Independent distributors, on average, are making only marginal profits and surviving almost wholly through prompt payment terms offered by manufacturers. Figures quoted in the document show profit as a percentage of turnover being 0.82, 0.2 and 0.87 per cent for July, August and September last year. Arbitrary price

reductions last August cost Group members a capital loss of £187,426, it is claimed.

An uncontrolled discount war between large distributors, a flood of cheap, unlicensed and potentially dangerous imports from abroad, and "cowboy" distributors dealing only in short-line high profit stocks has resulted in essential investment in buildings and technology being halted, stocks of medicines being reduced to below the necessary levels, and the level of service through regular deliveries being put in jeopardy, the Group says.

The practice of rural doctors dispensing their own medicines is a further disincentive to both wholesalers and pharmacists. In some cases, says the document, the practice could prove crucial to the viability of a rural pharmacist and its wholesaler.

The Onward Group seeks to agree a realistic gross margin from manufacturers at a lower level than present; standardise payment procedures for the present 2.5 per cent prompt payment allowance from manufacturers, which could be passed on to retailers at the same agreed level, and ensure that distribution of prescription products is carried out through bona fide whole-line pharmaceutical distributors.

The Group also urges action on parallel imports, to redefine the Exemption Order under which drugs are presently imported, and to regulate parallel importing to minimise the effect on the UK economy.

In addition a new pharmaceutical distributors licence is called for, such that all prescribable medicines are distributed via full-line wholesalers who operate to agreed standards of warehousing and control.

"We urgently ask for our continued existence to be recognised by Government, and for steps to be taken now to save our service," the document concludes.

Mr Hugh Butler describes the Onward Group as a means of exchanging management information. The 12 members are: E. H. Butler & Sons Ltd (Leicester), Herbert Ferryman Ltd (Southampton), Rames Clark & Co Ltd (Edinburgh), Richard Daniel & Son Ltd (Derby), T. A. Ward & Co Ltd (Blackburn), Hall Forster & Co Ltd (Newcastle upon Tyne), Bleasdale Ltd (York), I. & N. Rabin Ltd (London), F. Maltby & Sons Ltd (Lincoln), Ridley (Wholesale Chemists) Ltd (Carlisle), Ayrton Saunders & Co Ltd (Liverpool), Grimwade, Ridley & Co Ltd (Ipswich).

## 'Buzzer' sale an offence

**Boots the Chemists were this week fined £200 for selling Codis without supervision of a pharmacist. They denied the offence but were found guilty at Chelmsford Crown Court.**

Mr Robert Webb, prosecuting, said Mr George Norris, an inspector of the Pharmaceutical Society went into the branch in High Street, Brentwood, on August 5, 1983, to make a test purchase. He bought a packet of Codis, a medicinal product not on the General Sale List.

The woman assistant, who was not a pharmacist, pushed a buzzer. Mr Norris looked towards the dispensary expecting to see a pharmacist approving the sale, but there was no recognition.

The inspector left the shop and returned with a colleague. They interviewed two pharmacists, neither of whom claimed to know about the transaction.

Miss Karen Dodson, the assistant who served Mr Norris, said she pressed the buzzer to get a pharmacist's attention, holding up the packet as she did so. She could not say whether or not she got an acknowledgement from a pharmacist: nonetheless, she must have done so, otherwise she would not have made the sale.

Mr Christopher Gibson, defending, said Boots were trying to see how best they could improve the sales system in the light of the case.

## Ventolin writs

Writs have been issued by Glaxo against Dowelhurst Ltd of 29 Warwick Road, Coventry and Sigma Pharmaceuticals of Imperial Way, North Watford.

They are for alleged infringement of copyright and trade mark and passing off in respect of Allen & Hanbury cartons and patient leaflets for Ventolin inhalers.

## Comment on laetrile

The DHSS is inviting comments on the proposed restriction of products containing amygdalin (laetrile) to Prescription only (*C&D February 25, p354*).

Comments should be sent by the end of the month to Mr H.D. Jones, Room 1324, Department of Health and Social Security, Market Towers, 1 Nine Elms Lane, London

*Chemist & Druggist 10 March 1984*



## Withdrawal of phenylbutazone

**Phenylbutazone is to be restricted to use in hospitals for arthritis of the spine, and all stocks of the drug are to be withdrawn from retail pharmacies. Mr Kenneth Clarke, Minister of Health, said in the Commons on Tuesday.**

The Committee on Safety of Medicines last week advised the Minister to restrict the drug (*C&D* March 3, p392). "All the companies concerned have agreed to comply with the CSM's advice in respect of products containing phenylbutazone, or to cease to market them," said Mr Clarke. "Those that wish to continue to market these products are being asked to submit applications making the necessary variations to their licences.

"All stocks of these products are to be withdrawn from retail pharmacies. Discussions are taking place with companies on the timing of withdrawal in order to ensure that doctors and patients are enabled to change to alternative courses of treatment in an orderly way."

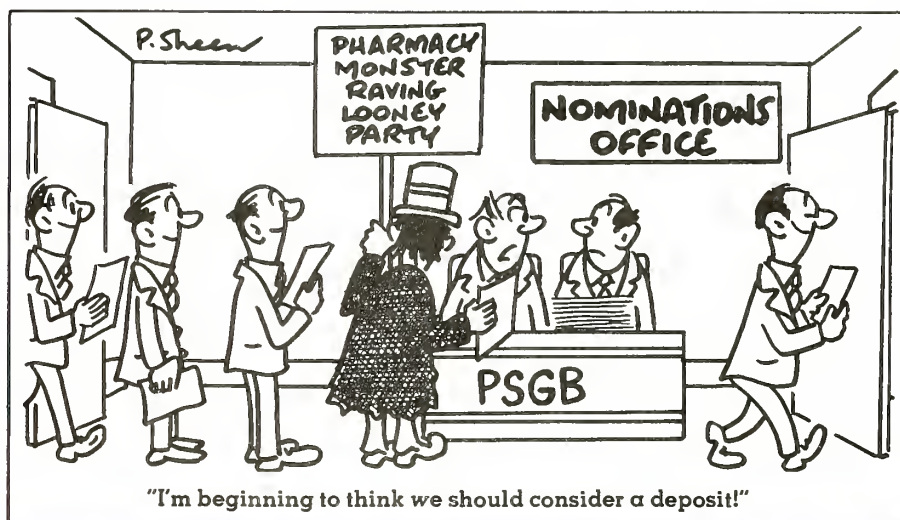
No action has been announced yet regarding oxyphenbutazone. The CSM recommends that the licence be withdrawn. The only company concerned, Geigy Pharmaceuticals, are considering this advice, and whether they should appeal to the Medicines Commission within the statutory 28 days allowed, Mr Clarke said.

The CSM considered whether in the interim the licence should be suspended by the licensing authority, thus prohibiting prescribing, but advised that such action would not be justified.

"I will take action on the licence of this product immediately the company agree to the CSM's advice, or I receive the Medicines Commission's advice if the company do decide to appeal to that body," Mr Clarke announced.

**Editor's comment:** As *C&D* went to press it was announced that manufacturers of products containing phenylbutazone will be writing to all retail pharmacists asking them to return unused stocks of their products by April 1 or as soon as possible afterwards. This is believed to be the first time a widely prescribed generic has been involved in such a recall, and the relevant ABPI committee was on Wednesday considering the implications. Meanwhile, the public has been prompted by the *Daily Mail* and Ministerial statements to expect withdrawn drugs to disappear from the market. But phenylbutazone has not yet been withdrawn! We hope the public will understand its "limbo" status and wish pharmacists a peaceful week.

*Chemist & Druggist 10 March 1984*



## Cost of doctor dispensing

**The Rural Pharmacists Association is asking for further evidence of discounts offered to dispensing doctors in its latest "Newsletter."**

The Association has also received financial support from one manufacturer with an assurance that it only supplies dispensing doctors via pharmacy wholesalers.

The RPA has discovered that Organon have been offering substantial discounts to dispensing doctors for a number of years.

The company confirmed to *C&D* this week that dispensing doctors were offered 500 Tetrabid capsules for £41.33 instead of

£55.11 trade. Additionally, 100 free capsules are offered for every 1,000 ordered. Both offers apply to direct orders. The company said the arrangement had existed for ten years or more and was possibly originally used to encourage use.

Pharmacists are offered 10 per cent discount on direct orders of £100 or more.

Conversely Thomas Kerfoot has told the RPA that it shares the Association's deep concern about the increasing number of dispensing doctors in the UK. The company has a long standing policy not to supply dispensing doctors as a house account. The RPA recommends that wholesalers should be encouraged to direct doctor dispensing business through pharmacy channels: "This would at least have the virtue of control of supply and costs of doctor dispensing."

## 'Bitter sweet' pills all round

**The *Lancet* was partially blamed for the latest in a line of "pill scares" in BBC's *Panorama* on Monday, about the "bitter sweet" oral contraceptive pill.**

The media were warned about two papers on possible connections between the contraceptive pill and breast cancer and

cervical cancer published last October, said reporter Barbara Jay. "The *Lancet* issued a Press release underlining the scare message" and "bound to whet the appetite of news editors." Meanwhile doctors were not informed. Even the Department of Health, which had the information in advance, did not mail doctors until the day before *The Lancet* articles were published. The Department was also criticised over the publication of pill classification in terms of steroid potency, later shown to be inaccurate.

## DHSS to buy script data

The Department of Health is to obtain prescribing data from IMS International and Gallup until information is available sufficiently quickly from the Prescription Pricing Authority, in about three to four year's time.

Following the CSM's working party report on adverse reactions to medicinal products (*C&D* 6 August 1983, p232) a pilot information campaign to increase awareness of adverse reactions and the need to report them is to be mounted in the Spring, says MoH Kenneth Clarke.

Other changes include a free-phone and answer-phone service installed by the Department to enable doctors to pass information to the CSM 24 hours a day.



For 25 years  
the first choice of doctors

# CERUMOL<sup>®</sup>

the most effective way of loosening ear wax

CERUMOL is also available to customers over the counter. When your customers ask your advice about 'blocked ears', you know you can recommend CERUMOL with confidence.

***proven in practice***

Cerumol is a trade mark



Laboratories for Applied Biology Limited 91 Amhurst Park London N16 5DR.



## Scripts reach new peak

**The number of prescriptions dispensed by chemists and appliance contractors in England rose to its highest ever level last year.**

The report of the Prescription Pricing Authority for 1982-83 shows chemists dispensed 310,801,575 prescriptions during the year, an increase of 7.87 million (2.6 per cent) on 1981-82. This is the first time that numbers have risen above the 308 million scripts level of 1978-79, when each item cost £0.20.

The average cost per prescription for 1982-83 was 309.32p, an increase of 11.6 per cent on the previous year. Kensington,

Chelsea & Westminster FPC had the highest average total cost per prescription at 457.69p, followed by Isle of Wight, Oxfordshire and Northumberland.

The number of prescriptions dispensed by doctors rose 3.8 per cent to 19,632,699. The average cost per prescription for doctors remunerated on the Drug Tariff basis was 444.20p.

The PPA's computerisation programme continues, with conversion of the Wakefield due to start later in the year, and the change at Bolton being completed. Three divisions are currently running a computerised pricing service.

Information on prescribing continues to be provided in line with Departmental policy of encouraging doctors to request prescription analyses. 1,387 such reports were provided during the year. The PPA also provided data for ten research projects.

## Dismissal claim not upheld

**A woman lost her claim for constructive dismissal this week because she could not prove that her pharmacist employer — her estranged husband — had forced her to leave by his behaviour.**

Mr Charles Shaw only talked to his wife through a third person, an industrial tribunal was told. Mrs Barbara Shaw said her husband left her for a nurse who worked for the doctor next door.

The atmosphere at the group pharmacy in Ashton, Lancashire, where she worked was terrible and for seven months she had only spoken with Mr Shaw through a third person or in general terms.

Her husband had said he would leave the pharmacy. "So I continued to work, but

in a horrible atmosphere. I feel I was forced to leave my job because Mr Shaw believed I was an embarrassment to him," she told the Manchester Tribunal.

Mrs Shaw said she had worked at the pharmacy for 14 years — her husband was one of six partners. She claimed he had not given her any money. But Mr Shaw said that when he left his wife he had given her £3,000 and paid all the outgoings on the house. "I did not ignore her and I didn't try to get rid of her," he said.

He had never intended leaving the pharmacy. "It was embarrassing for both of us, but it's not true," Mr Shaw said.

"I spoke to Mrs Shaw only through a third person. After the break-up, I tried to make as little fuss as possible."

The tribunal dismissed Mrs Shaw's claim.

Mr George Rhodes the chairman, said she had not proved her employer's behaviour had forced her to leave.

## Pharmacist steals Dexedrine

**To get over grief a pharmacist started taking tablets from the Controlled Drug cabinet where she worked at Boots in Chiswick.**

It went on for five years before she was caught and 53 year old Valerie Stewart, of Sutton Court Road, Chiswick, appeared at Acton Magistrates Court on Friday last week. There she admitted stealing 1,200 Dexedrine tablets between January 1, 1983 and January 31 of this year.

Detective Sergeant Peter Savage told the court that the keys to the cupboard were above it so could have been available to anyone. Over 5,000 tablets had gone.

*Chemist & Druggist 10 March 1984*

Fiona MacDonald, defending, said Mrs Stewart had lost her mother to cancer and had been taking tablets to ease her grief. Mrs MacDonald said that if Mrs Stewart had gone to her doctor she might well have been given some tablets to help her.

Mrs MacDonald told the bench that these tablets had been heavily abused in the 1960's and although not addictive one could become mentally dependent on them and this was what had happened to Mrs Stewart.

A number of references were handed in to the bench and Mrs MacDonald said that now Mrs Stewart would lose her job.

The bench told Mrs Stewart that the worst part of the punishment was that she could be struck off the Register of Pharmaceutical Chemists, and gave her a conditional discharge for one year.



Miss Elizabeth A. Meikle, FPS, chief administrative pharmaceutical officer, Greater Glasgow Health Board, outside Buckingham Palace on Tuesday after her investiture with the OBE. Miss Meikle, who was honoured in the New Year list, is also chairman of the Pharmaceutical Society's Scottish Executive

## PGC initiates cost inquiry

**Scottish contractors are being asked by the Pharmaceutical General Council (Scotland) to participate in an inquiry into net ingredient cost.**

Letters are being sent this week to about 100 of the 1,100 Scottish contractors. Part of the recent agreement between the Scottish Home and Health Department and the PGC which cancelled the discount clawback was that a survey should be undertaken with the minimum of delay.

The 100 shops being approached have been allocated to five groups determined by size of NHS turnover, and each group is subdivided to represent the wide geographical spread of Scottish pharmacies. Prescriptions dispensed during March will be examined to obtain prices reimbursed by the Prescription Pricing Division, and suppliers' invoices for the period January-March will be examined to determine the net cost of the items dispensed to the contractor.

The results of the survey will be applied from February 1, 1984. Dr Colin Virden, secretary of the PGC, points out in the letter being sent to contractors that it can only be in their long term interests to co-operate and thereby enable the survey to continue without delay.



by Xrayser

## Further drop in pharmacies

**Pharmacy numbers fell by 11 in February to bring the number of premises on the Register down to 10,938, a decrease for the second month running.**

There were 14 additions to the Register in England (seven in London) and 20 closures (six in London). Two pharmacies closed in Wales, while in Scotland one shop opened up but four closed.

## Bulb warning

Philips Electronics are warning that a "very restricted number" of Topflash 8 PF8P flash bulbs supplied to the trade since Autumn 1983 may have blue protective front covers which do not sufficiently withstand the force in the event of a bulb shattering.

The warning applies to the 8 bulb units only, and Philips say the bulbs should not be used. Advertisements in the national Press invite users to return bulbs to Dept PF8P Philips Electronics, City House, 420 London Road, Croydon CR9 3QR.

## Conference trip

A full-day "round the island" excursion has been arranged to start this year's British Pharmaceutical Conference in Southampton. On September 10 members will be taken by boat from Southampton to Cowes, when a coach will take them for a tour round the Isle of Wight.

Application forms for Conference are now available from: *E.D. & V.A. Weaver, joint conference secretaries, 26 Woodpath, Southsea, Hampshire PO5 1DX.*

## Generic saving

Generic prescribing would save the National Health Service £35 million a year, Minister for Health Kenneth Clarke said in a written Commons reply last week.

However, savings made through changes to the Pharmaceutical Price Regulation Scheme, coupled with efforts to encourage effective prescribing by doctors were the best way to cut the drugs bill.

■ The Prescription Pricing Authority is studying prescriptions dispensed during January, February and March to identify those written for Zomax, Osmosin, Zelmid and Flosint, Mr Clarke also said.

## Be brief!

I loved the editorial in *C&D* last week where the man who crosses out all my excesses, (the editor) declared himself overwhelmed by the outpourings of those of us so fed up that we actually thrust fumbling fingers to pen and paper in an attempt to put the only sane view forward for approval.

Having read some of the letters I have to agree that the best are those which make one point with economy and style. Too many flowers in the bouquet have a fatal resemblance to funeral offerings, in that while the florist may enjoy the making, the receiver is unlikely to respond.

Which brings me to a letter last week jointly signed by Ashwin Tanna, Mike Reynolds, Nicholas Wood and Dengar Evans, which although long, seemed remarkably lacking in the decorative embellishment we have come to expect (and, to be honest, to enjoy) from the last named. It is clear these pharmacists believe the future of retail pharmacy should be realised in the ideal of ownership by pharmacists of all shops. I've nothing against it but believe that as things stand they cannot put up a case to prove it would be better for the public than the present situation — *in terms of the services offered.*

It could be reasoned that ownership may revert to individuals or partnerships if the contract (which is the basis of most retail pharmacies) becomes less profitable for the major multiples than other aspects of retail trading. It might then be advantageous to those who think ownership should be with the pharmacist, if the Government were to squeeze contractors even harder over profit, on-cost and fee.

The implication is that once this had happened, those lucky pharmacists on whom the business-like multiples unloaded the dispensaries would somehow be able, through their combined strength, to arm-twist the Government into granting the Utopian promised land. But this leaves me strangely sceptical. I am pretty certain that in this fair land, no government is going to put through legislation requiring companies which have legitimately been operating and opening pharmacies to sell them to pharmacists because we feel it would be nice for us to own them. How do the candidates see this being achieved?

## Dozey?

What has happened to the NPA? Not a lot? Not enough! I am struck by the content of the terse note from A. Shah of Edgware last week, when he cited the profit margin of 20 per cent on return for Triadol and the new

Cymalon, and noted that Sterling Health are bringing out four new pharmacy only products this year. It's one thing for one or two of us to squawk about this, but we carry no weight.

Sterling Health, as part of the Winthrop group, are associated with that other crowd who keep telling us they are on our side, send us tickets to the Boat Show, wine and dine us and generally do us proud. So why the slap-down from the left hand? It must be because having cynically marked us down as idiots who don't check our prices, they feel they can play games with us and get away with it.

Which is where I feel the NPA has a role to play. Definitely. With a heavy-handed representation to the makers that the margin should be appropriate to the qualified supervision and recommendation the pharmacist has to bring to the retail transactions. A big note in the pink supplement as a warning shot, stating what was being done, would make a start.

## NPU payout

So, all you lucky investors of 18 years ago who, in full emotive enthusiasm, stumped up your 40 or 50 quid, eyes-a-sparkle at the prospect of establishing one proper pharmacy-only brand of toiletries etc, are to get your money back . . . at a profit! 100 per cent! Big deal.

Do you realise how much you have lost? Had you invested in a house, for example, at £3,000 then, it would be worth £35,000 today. Had you invested in the general stock market, your shares might have been worth several times what you paid for them. We didn't do very well, did we?

Only 10 per cent of the capital invested in the product range for which we put up the money? Perhaps if it had all been used we could have owned a company with as much clout as Beechams by now!

*Editor's note:* The grass was not all that greener for shares generally — the FT index didn't quite treble over the same period.

## Supplementation

What a lovely word! Particularly when used in the letter in this issue (and forwarded to me in advance by the editor) from Tony Pinkus, referring to what he calls my "condemnation" a couple of weeks ago, of the consumption of all sorts of additional vitamins.

After you have all read it (five or six times) I'll leave you to come to your own conclusions as to whether my propensity to pontificate is pomposity personified or perceptive pragmatism . . .

*Chemist & Druggist 10 March 1984*



is for when  
they're new.

# 6-year-olds and over.





# MORE CHEMISTS ARE TURNING TO SPORT...



## ProSport

ProSport is a scientifically designed, superbly presented and significantly better range of surgical support products.

ProSport incorporates medically approved features underlined by its strong sports flavour and appeal.

### MADE TO MATCH BY SETON

Skilfully researched, stylishly packaged, sharply priced and sold through chemists.

### MADE VERSATILE BY SETON

For most types of joint injuries, sprains and strains to ankles, knees, wrists and elbows.

### MADE TO LAST BY SETON

On or off the field.  
All game or all day through.

### MADE TO SELL BY SETON

Through advertising in national press and major sports publications.



## Seton

THE TUBIGRIP PEOPLE

Tubiton House · Oldham · OL1 3HS England · Tel: 061-652 2222 Telex: 669956 (Seton G)



## Analgesics display from Winpharm

"Aches? Pain? Temperature? Ask your pharmacist's professional advice" is the message on a new acrylic counter display unit for the Winpharm analgesics range.

The unit stands 12½in wide, 7in high



and 4½in deep. It holds Panadol on one side and Panadeine or Solpadine on the other — six 12s and five 24s of Panadol, and either three 12s and three 24s of Solpadine or six 12s and five 24s of Panadeine. On the back it has a grid describing degrees of pain relief and suitable products as an "aide memoire" to the pharmacist and counter assistant.

A free unit can be obtained from local Winpharm representatives from the sales office or at Winpharm, Winthrop House, Surbiton, Surrey KT6 4PM.

## Vivas update

Elida Gibbs are launching a new Vivas pack. Under the name of Suisse the pack will be in a deep claret colour banded in a shade, sapphire and pink V logo. The deodorant itself will be unchanged. *Elida Gibbs Ltd, PO Box 1DY, Portman Square, London W1A 1DY.*

## Sponges on the move

Dean Warburg Marketing have taken over the distribution of Ramer Chemical Products from Thomas Christy.

Retail prices are unchanged but trade prices of the sponges have been reduced: bath sizes now cost £2.37 for a carton of

*Chemist & Druggist 10 March 1984*

three; toilet size £3 for 6; shower sponges £2.64 for 6; baby sponges £3.48 for 12 and cosmetic sponges £1.92 for 12.

A new bath sponge — face-makers — is also being introduced (£1.25; trade £8.52) coming in packs of 12 with display stand.

An introductory promotion (£57 excl. VAT) comprises 12 bath, 18 toilet, 12 shower, 36 baby and 36 cosmetic sponges, plus 24 face makers and display stand.

*Dean Warburg Marketing Ltd, Old Bond Street House, 6 Old Bond Street, London W1X 3TA.*

## Win a trip to the Algarve

Bristol-Myers Pharmacare are offering pharmacists the chance to win a £500 holiday in the Portugese Algarve (see form on page 449).

Entrants are asked to send in an order for Comtrex or Duralin by April 30 — though an order is not necessary to be eligible for the draw.

On receipt entries will be numbered and the winner picked by computer. A contribution of £500 will then be paid direct to the travel agent towards the holiday chosen by the winners. *Bristol-Myers Pharmacare, PO Box EH272 Station Road, Langley, Slough SL3 6EB.*

## Three offers from Shulton

March sees a burst of Spring activity from Shulton for Pierre Cardin, Ma Griffe and Choc.

For Pierre Cardin the company is introducing a gift box holding a 55ml aftershave, 25g talc and 40g soap which retails for the price of the aftershave (£8.95). And for the more sporting consumer there is the Pierre Cardin sports kit holding a 50ml shampoo, 25g talc, 22ml aftershave 40g soap and 2 wristbands in the Cardin livery — all for £8.95.

A barrel bag is the latest offer to consumers of Choc with purchases over £9.95. And the company promises a further offer on Choc for May. Finally, with Mother's Day in mind Shulton are introducing a Ma Griffe 30ml parfum de toilette (£4.95) in a green and white gift box. Showcards are available for POS. A Dollybag is available with purchases of £12 or more. It contains 50g talc and 50ml body lotion. *Shulton (GB) Ltd, Fine Fragrance Division, Alexandra Court, Wokingham, Berks.*

## Pour Lui range goes national

Pour Lui deodorant, talc and soap are to be introduced nationally after a Harrods launch. The deodorant (85g, £6.95) is a solid push-up block; the talc (85g, £6.95) has a shaker top, while the soap (142g, £5.95) comes in a complementary travel box with a draining tray.

Turning to Oscar de la Renta women's range, three "travel size" bottles of eau de toilette (1oz spray), body lotion activee and body bath activee (both 50ml) have been introduced in a vinyl drawstring pouch (£20). Available April 1 from *Oscar de la Renta, (London) Ltd, St George's House, St George Street, London W1.*

## All change for Futuro

Futuro products are to be re-launched in April through new distributors Solport Ltd.

Solport, already suppliers of medical-surgical products and chemists sundries under the Portia brand, intend to give this health support range a new look. The size of the product will be more clearly displayed and information on product wear and care will be featured, plus a money back guarantee.

To mark the launch a bonus pack is being offered whereby free stock is given with placement of the first order. Promotional support and Autumn advertising in the national Press will back the range. *Solport Ltd, Portia House, Goring-by-sea, Worthing, West Sussex BN12 5AD.*

## Yes or no?

Warner Lambert neither confirm nor deny reports in *Marketing Week* that they are working on final launch plans to enter the contraceptive sheath market.

A company statement issued in response to the story says: "Our parent company is a distributor of contraceptive sheaths for the domestic market in the US and Canada. Like any other major company we are always interested in new product opportunities and therefore there are many diverse markets that we are investigating in Europe." *Warner Lambert Healthcare, Southampton Road, Eastleigh, Hants SO5 5RY*



# Milupa add Muesli to their rusk range.



Milupa, once again bringing new ideas to the baby food market, are proud to announce a health food specially formulated for babies.

The new Muesli Rusk contains all the natural goodness of wholemeal cereals, apples, sultanas and nuts baked together into a tasty rusk that babies and mothers will love.

Muesli Rusk is the natural addition to the Milupa Rusk range.

So stock up now with this and the complete Milupa range of low sugar rusks for all baby mealtimes.



## **milupa**

### **The new generation of Rusks**

For further information please contact Milupa Limited, Milupa House, Hercies Road, Hillingdon, Uxbridge, Middlesex UB10 9NA. Telephone: Uxbridge (0895) 59851.





## Mennen shake up deodorant market...

A burst of activity can be anticipated in the UK anti-perspirant/deodorant market following the arrival of Speedstick from the States.

To be launched nationally by Chemist Brokers in May, Speedstick heralds the first major drive into the UK by the American toiletries giant Mennen. Speedstick was originally available in this country in the 1960s but was discontinued.

The company aims "to gain a significant entry into the deodorant market and obtain a 5 per cent brand share by the end of the first year." With this in mind they have allocated £2½m for promotional support — £2m of which is earmarked for a national television advertising campaign running from May through to September.

Speedstick deodorant for men (75g, £0.99) with its wide elliptical shape and twist-up dispensing mechanism makes usage easy, says the company, while in tests the 75g size was found to outlast over 1½ aerosol cans. Three of the six fragrances available on the US market are to be launched into the UK. They are regular, spice and a light herbal fragrance.

With £2m allocated for TV advertising a



perspirant/deodorant market, there will be bonus case prices at launch.

When the brand was first actively promoted in America in 1975 the market split was aerosols (75 per cent), roll-ons (20 per cent) and solids had a 2 per cent slither. By 1982 the market had grown by some 60m units to 460m with solids and roll-on both now taking a 32 per cent and aerosols a drastically reduced 30 per cent. And it is not just in the male sector that solids have gained ground. Figures show that aerosols have lost out to roll-ons and solids in both sectors of the market. Solids now take a 51 per cent share of the male sector and 21 per cent of the female market. Speedstick in America is now the number one brand in the solids sector and fourth in the total deodorant market.

In the UK market, estimated to be worth £69m at rrp this year, Chemist Brokers point to a similar trend away from aerosols (1975 — 67 per cent, 1981 — 48 per cent) and with 78 per cent of men still using an aerosol they believe there is great potential for Speedstick to aggressively attack this market share. In-house tests resulted 44 per cent expressing a preference for Speedstick against their normal brands on the grounds of effectiveness, ease of application, fragrance and value for money. *Chemist Brokers, Milburn, Copsem Lane, Esher, Surrey KT10 9EP.*

## ... as Old Spice now in 20g ...

Old Spice stick deodorant is to be introduced in a 20g size (£0.29) to stimulate trial. The sticks come in merchandisers holding 24 (£8.87 excl VAT). The launch will be backed with a saving of £0.30 on the large 75g Old Spice stick and some regional television advertising. The campaign begins with Granada in March and runs through Central, Scotland, and Anglia in June. *Shulton (GB) Ltd, Shulton House, Alexandra Court, Wokingham, Berks RG11 2SN.*



## ... and Gillette relaunch Right Guard

Gillette are changing their Guard this Spring. New formulations and packaging are to be supported by £2½m promotional campaign.

The new formulation will include an improved active ingredient and a propellant which gives a drier, warmer spray the company says. A lightly perfumed variant also replaces the original anti-perspirant.

The most visible change to the consumer



will be in the packaging, which is to feature a graphic symbol representing Right Guard's double-action formula and which links with the new television commercial. Roll-on packs will carry the same design and will be colour-coded in line with the aerosol range.

Advertising support begins in May and POS material including flexible modular display systems and shelf organisers will be available. Promotional activity begins this month with the offer of 25 per cent extra value packs. *Gillette UK Ltd, Great West Road, Isleworth, Middx.*

## Olympic link for Blue Stratos

A trip to the Los Angeles Olympics is the prize in Shulton's Blue Stratos promotion. Winner of the competition will receive a two week visit for two persons, which also includes trips to San Francisco and Las Vegas, while the runner-up obtains one week at the games. Every entrant will get a voucher for 10 per cent off purchases over £20 in any Olympus Sport store.

Entry forms are incorporated in a pack flash around the caps of Stratos anti-perspirant, bodyspray and aerosol deodorant. *Shulton (GB) Ltd, Shulton House, Alexandra Court, Wokingham, Berks RG11 2SN.*



further £½m will cover the promotional programme which begins immediately with the launch of a 25g trial size for £0.29. The offer comes in a display tray of 36 — 12 each of the three fragrances (trade price, £6.19). The unit will hold the 75g size once the trial sizes are exhausted.

Coinciding with the launch national Press advertising in the *Daily Mail*, *Sun*, *TV Times*, *Sunday Times* and *My Weekly* will carry money-off coupons worth £0.20 through to the end of July. Following on from this there will be an on-pack coupon offer saving £1 — a 50p coin and 50p-off coupon to generate repeat purchase.

For the chemist trade (including drug stores) taking a 55 per cent slice of the anti-

*Chemist & Druggist 10 March 1984*



# YOU ONLY NEED THESE 3 FIXATIVES TO SECURE YOUR PROFITS NICELY.

75% of all sales come from Stafford-Miller denture fixative brands, primarily Super Wernets, Super Poli-Grip and Dentu-Hold –

each No. 1 in their respective fields of Powder, Cream and Liquid fixatives.

So your customers need go no further.

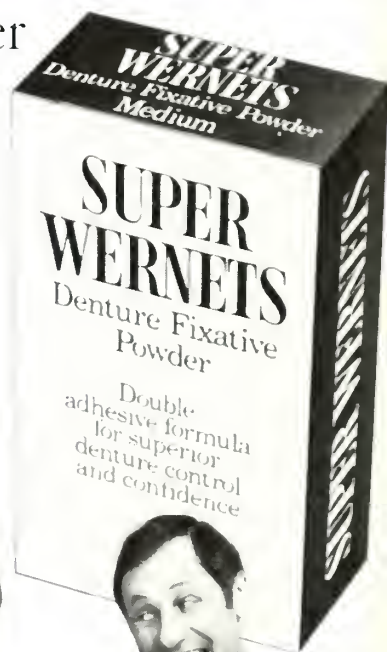
All their needs are met by these three brands.

All are getting solid advertising support during 1984. With

more than £1,000,000 behind the three leading

brands, they're going to get a lot of notice, in this dynamic market.

And if you make sure of being well stocked with these three category leaders, you can take a confident bite at the profits.



**SUPER WERNETS · SUPER POLI-GRIP · DENTU-HOLD.**

Stafford-Miller: the first name in denture care.



## Unican's second phase aims to boost lager

With the completion of Unican's first three year plan — in which Unican claim the home brew market grew in value by 15 per cent compared to their own 40 per cent growth — the company is entering into its second phase with Unican beer kits making their debut in television advertising.

Describing the first phase as "extremely successful" — with brand leadership in the wine and a strong position in the beer sector maintained — the company aims to double Unican sales by strengthening wine sales and doubling their share of the beer market.

Advertising spend is to be increased to £1m compared to £650,000 last year. Television support for wine featuring the Unican Frenchman goes national in August supported by in-store wine tastings and a specialist Press campaign.

While the Special Reserve products were proving extremely successful the company felt there was a gap in the range and intend to fill this in April with the launch of a rosé variant (£3.77). "It would be dangerous to switch off our efforts on wine," says Keith Hockings, deputy managing director, "the opposition could wake up."

In the beer sector the company has decided to concentrate on lager. Research

of the beer market and to help achieve this there will be a March/April eight week television test campaign in the Harlech region commencing March 12. The test will then roll out into other television areas in the second half of the year.

The humorous commercial features a party situation where Unican home brew lager is being served to experts from Australia, Germany and Scandinavia.

Says Mr Hockings, "With sales of our beer kits last year showing a very healthy 40 per cent rise, we are confident that the 1984 campaign will be the first step in our aim to double our share of the beer sector within three years." In-store beer tastings will also be carried out in the Harlech region. *Unican Foods Ltd, Unican House, Central Trading Estate, Bath Road, Bristol BS4 3EH.*

## ICML savings

Savings from Independent Chemists Marketing Limited during March are available on Nurosoft baby wipes, baby bath, shampoo, talc (100gm and 300gm), oil, cream, lotion, soothers, press-on sanitary towels in 10s and 20s, kitchen towels, panty liners, mini-pads, pleats, triple pack sponges and marble, toilet, baby and bath sponges, economy and standard puffs, nursery wool, blackcurrant health drink, Sunpure fruit drink and Nuhome mansize tissues, family tissues and toilet rolls.

Member bonuses are available on all the above products. On the purchase of a composite pack of Denman hairbrushes a free stand is offered in addition to a 10 per cent discount.

A 17½ per cent bonus on NPA high density bags is available plus a 15 per cent bonus across the complete range of NPA prescription and counter bags, while a 7½ per cent bonus is offered on NPA carrier bags and tablet cartons. *ICML, 51 Boreham Road, Warminster, Wilts.*

## Sampling starts for Headlines

A leaflet drop for Headlines anti-dandruff shampoo commences March 12 to 10m homes.

The leaflet carries details of a two-way free offer: a full cash refund for the return of a 125ml size Headlines outer carton or a free 50ml trial pack of Headlines in return for the outer carton on any other brand of anti-dandruff shampoo. *Beecham Proprietaries Medicines, Beecham House, Brentford, Middx.*

## Wella on TV

The Spring advertising campaign for Wella Stylite mousse breaks on March 12 and runs for five weeks on Channel 4. It develops the theme "Stylite — you've no style without it." The target audience is the 18-35 year old woman. *Wella Great Britain, Wella Road, Basingstoke, Hants.*

## .. and Silkience

Silkience shampoo and conditioner is being supported with a £750,000 national television advertising campaign running currently until the middle of April. The 30-second commercial will continue to promote the self-adjusting principle.

Current promotions are 40 per cent extra free on the shampoo and a free coin back offer on the conditioner. The latter enables consumers to obtain a 20p coin with the 100ml conditioner and a 50p coin with the 200ml on the redemption of a bottle cap and till receipt. *Gillette UK Ltd, Great West Road, Isleworth, Middx.*

## Tahiti on offer

Tahiti luxury foam bath will retail for a Spring offer price of £0.89 until the end of May. *Johnson Wax Ltd, Personal Care division, Frimley Green, Surrey.*

## ON TV NEXT WEEK

Ln London	WW Wales & West	We Westward
M Midlands	So South	B Border
Lc Lancs	NE North-east	G Grampian
Y Yorkshire	A Anglia	E Eireann
Sc Scotland	U Ulster	CI Channel Is
Bt Breakfast Television		C4 Channel 4

Canderel:	U, B
Cidal soap:	Bt, C4
Complan:	All except M, A, U, Y, NE, CI
Coldcare:	All areas
Cosifits:	All areas
Crookes One-a-day:	All except CI
Hermesetas Gold:	Bt, C4
Infa-care:	All areas
Milton Fluid:	All areas
Night of Ulay:	Ln
Oral B Zendium:	Ln, M, Lc, So, NE, A, Bt, C4
Peaudouce:	Sc, C4
Pond's creams:	Bt
Sanatogen:	All areas
Sensodyne toothpaste:	All areas
Silkience:	All areas
Simple soap & skincare:	Bt
Vaseline intensive care:	Bt
Wella:	C4



found that while awareness of the Unican name was high, it was associated with wine yet the company was also seen as being more modern than Tom Caxton and John Bull. Results showed there was an opportunity to position Unican more competitively by using lager rather than bitter as a vehicle. Taking advantage of this the company is to launch an extra strong lager in 40 pint kits (£2.77).

Keith Hockings believes there is an excellent chance of doubling Unican's share



# YOU ONLY NEED THESE 3 FIXATIVES TO SECURE YOUR PROFITS NICELY.

75% of all sales come from Stafford-Miller denture fixative brands, primarily Super Wernets, Super Poli-Grip and Dentu-Hold –

each No. 1 in their respective fields of Powder, Cream and Liquid fixatives.

So your customers need go no further.

All their needs are met by these three brands.

All are getting solid advertising support during 1984. With

more than £1,000,000 behind the three leading brands, they're going to get a lot of notice, in this dynamic market.

And if you make sure of being well stocked with these three category leaders, you can take a confident bite at the profits.

**SUPER WERNETS · SUPER POLI-GRIP · DENTU-HOLD.**

Stafford-Miller: the first name in denture care.





## Unican's second phase aims to boost lager

With the completion of Unican's first three year plan — in which Unican claim the home brew market grew in value by 15 per cent compared to their own 40 per cent growth — the company is entering into its second phase with Unican beer kits making their debut in television advertising.

Describing the first phase as "extremely successful" — with brand leadership in the wine and a strong position in the beer sector maintained — the company aims to double Unican sales by strengthening wine sales and doubling their share of the beer market.

Advertising spend is to be increased to £1m compared to £650,000 last year. Television support for wine featuring the Unican Frenchman goes national in August supported by in-store wine tastings and a specialist Press campaign.

While the Special Reserve products were proving extremely successful the company felt there was a gap in the range and intend to fill this in April with the launch of a rosé variant (£3.77). "It would be dangerous to switch off our efforts on wine," says Keith Hockings, deputy managing director, "the opposition could wake up."

In the beer sector the company has decided to concentrate on lager. Research

of the beer market and to help achieve this there will be a March/April eight week television test campaign in the Harlech region commencing March 12. The test will then roll out into other television areas in the second half of the year.

The humorous commercial features a party situation where Unican home brew lager is being served to experts from Australia, Germany and Scandinavia.

Says Mr Hockings, "With sales of our beer kits last year showing a very healthy 40 per cent rise, we are confident that the 1984 campaign will be the first step in our aim to double our share of the beer sector within three years." In-store beer tastings will also be carried out in the Harlech region. *Unican Foods Ltd, Unican House, Central Trading Estate, Bath Road, Bristol BS4 3EH.*

## ICML savings

Savings from Independent Chemists Marketing Limited during March are available on Nusoft baby wipes, baby bath, shampoo, talc (100gm and 300gm), oil, cream, lotion, soothers, press-on sanitary towels in 10s and 20s, kitchen towels, panty liners, mini-pads, pleats, triple pack sponges and marble, toilet, baby and bath sponges, economy and standard puffs, nursery wool, blackcurrant health drink, Sunpure fruit drink and Nuhome mansize tissues, family tissues and toilet rolls.

Member bonuses are available on all the above products. On the purchase of a composite pack of Denman hairbrushes a free stand is offered in addition to a 10 per cent discount.

A 17½ per cent bonus on NPA high density bags is available plus a 15 per cent bonus across the complete range of NPA prescription and counter bags, while a 7½ per cent bonus is offered on NPA carrier bags and tablet cartons. *ICML, 51 Boreham Road, Warminster, Wilts.*

## Sampling starts for Headlines

A leaflet drop for Headlines anti-dandruff shampoo commences March 12 to 10m homes.

The leaflet carries details of a two-way free offer: a full cash refund for the return of a 125ml size Headlines outer carton or a free 50ml trial pack of Headlines in return for the outer carton on any other brand of anti-dandruff shampoo. *Beecham Proprietaries Medicines, Beecham House, Brentford, Middx.*

## Wella on TV

The Spring advertising campaign for Wella Stylite mousse breaks on March 12 and runs for five weeks on Channel 4. It develops the theme "Stylite — you've no style without it." The target audience is the 18-35 year old woman. *Wella Great Britain, Wella Road, Basingstoke, Hants.*

## .. and Silkience

Silkience shampoo and conditioner is being supported with a £750,000 national television advertising campaign running currently until the middle of April. The 30-second commercial will continue to promote the self-adjusting principle.

Current promotions are 40 per cent extra free on the shampoo and a free coin back offer on the conditioner. The latter enables consumers to obtain a 20p coin with the 100ml conditioner and a 50p coin with the 200ml on the redemption of a bottle cap and till receipt. *Gillette UK Ltd, Great West Road, Isleworth, Middx.*

## Tahiti on offer

Tahiti luxury foam bath will retail for a Spring offer price of £0.89 until the end of May. *Johnson Wax Ltd, Personal Care division, Frimley Green, Surrey.*

## ON TV NEXT WEEK

<b>Ln</b> London	<b>WW</b> Wales & West	<b>We</b> Westward
<b>M</b> Midlands	<b>So</b> South	<b>B</b> Border
<b>Lc</b> Lancs	<b>NE</b> North-east	<b>G</b> Grampian
<b>Y</b> Yorkshire	<b>A</b> Anglia	<b>E</b> Eireann
<b>Sc</b> Scotland	<b>U</b> Ulster	<b>CI</b> Channel Is
<b>Bt</b> Breakfast Television		<b>C4</b> Channel 4

Canderel:	U, B
Cidal soap:	Bt, C4
Complan:	All except M, A, U, Y, NE, CI
Coldcare:	All areas
Cosifits:	All areas
Crookes One-a-day:	All except CI
Hermesetas Gold:	Bt, C4
Infacare:	All areas
Milton Fluid:	All areas
Night of Ulay:	Ln
Oral B Zendium:	Ln, M, Lc, So, NE, A, Bt, C4
Peaudouce:	Sc, C4
Pond's creams:	Bt
Sanatogen:	All areas
Sensodyne toothpaste:	All areas
Silkience:	All areas
Simple soap & skincare:	Bt
Vaseline intensive care:	Bt
Wella:	C4



found that while awareness of the Unican name was high, it was associated with wine yet the company was also seen as being more modern than Tom Caxton and John Bull. Results showed there was an opportunity to position Unican more competitively by using lager rather than bitter as a vehicle. Taking advantage of this the company is to launch an extra strong lager in 40 pint kits (£2.77).

Keith Hockings believes there is an excellent chance of doubling Unican's share

*Chemist & Druggist 10 March 1984*



## African link for World of Curls

Skincare and haircare lines have been added to the World of Curls range of ethnic products. Based in California, World of Curls intend to establish a warehouse to service the UK and establish distribution links with Africa.

The new Blue Satin haircare line is a no-mix relaxer system comprising conditioners and hairsprays, together with a variety of hot transparent hair tints and permanent dyes. In the Simply Satin skincare range there is whipped cream cleanser with collagen, walnut facial scrub, skin freshner, peppermint clay mask and night cream for dry to oily skin types.

In all £100,000 has been allocated for



promotional support covering TV, Press advertising in both afro and hairdressing magazines, and activity at the Salon '84 and Afro hair exhibitions.

Television advertising will run in the Central region during May and June: and there are plans for a burst in London later in the year. While the coloured population in the UK stands at 1.2m, 53 per cent live in the London region and 24 per cent in the Central TV region. The company also plans a push in the Liverpool and Manchester regions later in the year. Distributors are *Double Gee Hair Fashions Ltd*, 120 High Road, Willesden Green, London NW10.

## Agfa 'new tech' films for TV

This month Agfa are launching a range of colour negative and colour slide films based on new technology backed by a national television campaign beginning in April and running until July.

The films are said to give much better colour rendering, greater sharpness, finer grain, and a wider speed range. All the new films have "structured twin crystals" —

either flat or compact in form — to produce high-speed combined with low graininess. The emulsion contains double colour layers and a filter interlayer which prevents ultraviolet radiation distorting colouration — for example in photographs of mountain scenery or at the seaside.

The Agfacolor XR colour negative films come in ISO speeds 100, 200 and 400 and replace Agfacolor 100 and CNS 400 films. Sizes are XR 100 135-12, 24 and 36 (£1.66, £2.28 and £2.90); XR 100 110-12 and 24 (£1.50 and £2.06); XR 100 126-12 and 24 (£1.57 and £2.17); XR 100 120 (£1.92), and XR Rapid (£2.02). XR 200 is available as a 120 roll film (£2.06) and 135-24 and 36 (£2.43 and £3.10). XR 400 completes the range as 135-24 and 36 (£2.71 and £3.45), 110-24 (£2.50) and 120 roll (£2.43). The new colour slide films are CT64 135-36 (£6.65) and CT 200 135-36 (£7.55) — both are process paid.

A full range of POS material backs the new films. Advertising in the enthusiast Press runs from May to August. Agfa are also supporting local dealer advertising of the films. And there is to be a new discount scheme on amateur film and equipment. For example, mixed film orders supplied in factory packs attract a 10 per cent discount on 50-199 units and 15 per cent for 200 or more units. *Agfa-Gevaert Ltd*, 27 Great West Road, Brentford, Middlesex.

## Lilia sampling

A free sample pack of Dr White's Contour tampons with a cotton and polyester tampon holder is the latest in-store promotion from Lilia-White. POS leaflets invite the consumer to send away for the lilac quilted holder which has a waterproof lining and drawstring top. Holding four tampons it would retail for around £0.75. *Lilia-White Ltd*, Alum Rock Road.

## Orlane extras for Spring

Spring colours, special effects make-up creme and a line reducing lipcreme are the latest offerings from Orlane.

Couleurs Surrealistes cover three "looks": Les Chromatiques comprises soft mauves accented with bronze in a duo powder eyeshadow (£7.25), powder blush (£9.95), mini-lipstick (£4.95) and nail enamel (£4.95); the Les Neutres face encompasses new neutrals sparkled with soft colourations in a quad-powder eyeshadow (£7.95), eye pencil (£4.25), mascara (£6.25), mini-lipstick (£4.95), and nail enamel (£4.95), while colourful

combinations in duo-powder eyeshadow (£7.25), powder blusher (£9.95), creme lipstick (£5.25) and nail enamel (£4.95) create the Les Primaires "look".

The new make-up creme, fond de teint traitant, is a lightweight formula allowing the designed degree of coverage, while leaving a natural-looking finish, say the makers.

The creme (£12.50) contains Orlane's complexe hydratant, to maintain the skin's moisture balance and has been dermatologically tested for known irritants and allergens.

Anti-rides tour des levres is the latest addition to the Ligne B-21 range. The lipcreme (£5.95) is designed to moisturise dry, sensitive lips, and counteract premature aging around the mouth. It contains a sunscreen and can be used with or without lipstick. *Orlane Cosmetics (UK) Ltd*, PO Box 3, Frances Avenue, West Howe, Bournemouth KT6 7LU.

## Attention Dads

The men's toiletries market sees a new entrant with the introduction of the Dads range.

The range includes aftershave (200ml, £4.95), shampoo (250ml, £0.99) and deodorant (56ml, £0.75). It will only be available to chemists and backed mainly by direct mail advertisements. *Staff Shops Ltd*, 11 Haslemere Way, Tramway Industrial Estate, Banbury Oxon OX16 8TX.

## Helfex launch

Figure Trim 8 capsules to be launched to the trade at Helfex (April 8-10), are claimed to help control eating habits and speed weight loss. Each pack contains a 14-day course of capsules — one to be taken before each meal. The capsules contain sterculia, phenylalanine, vitamin B6, apple pectin, boldo extract, kelp, juniper oil and potassium. They will retail for £3.25 but will initially be available at an introductory price of £2.99. *Health & Diet Food Co Ltd*, Seymour House, 79 High Street, Godalming, Surrey.

## Lancôme pencil

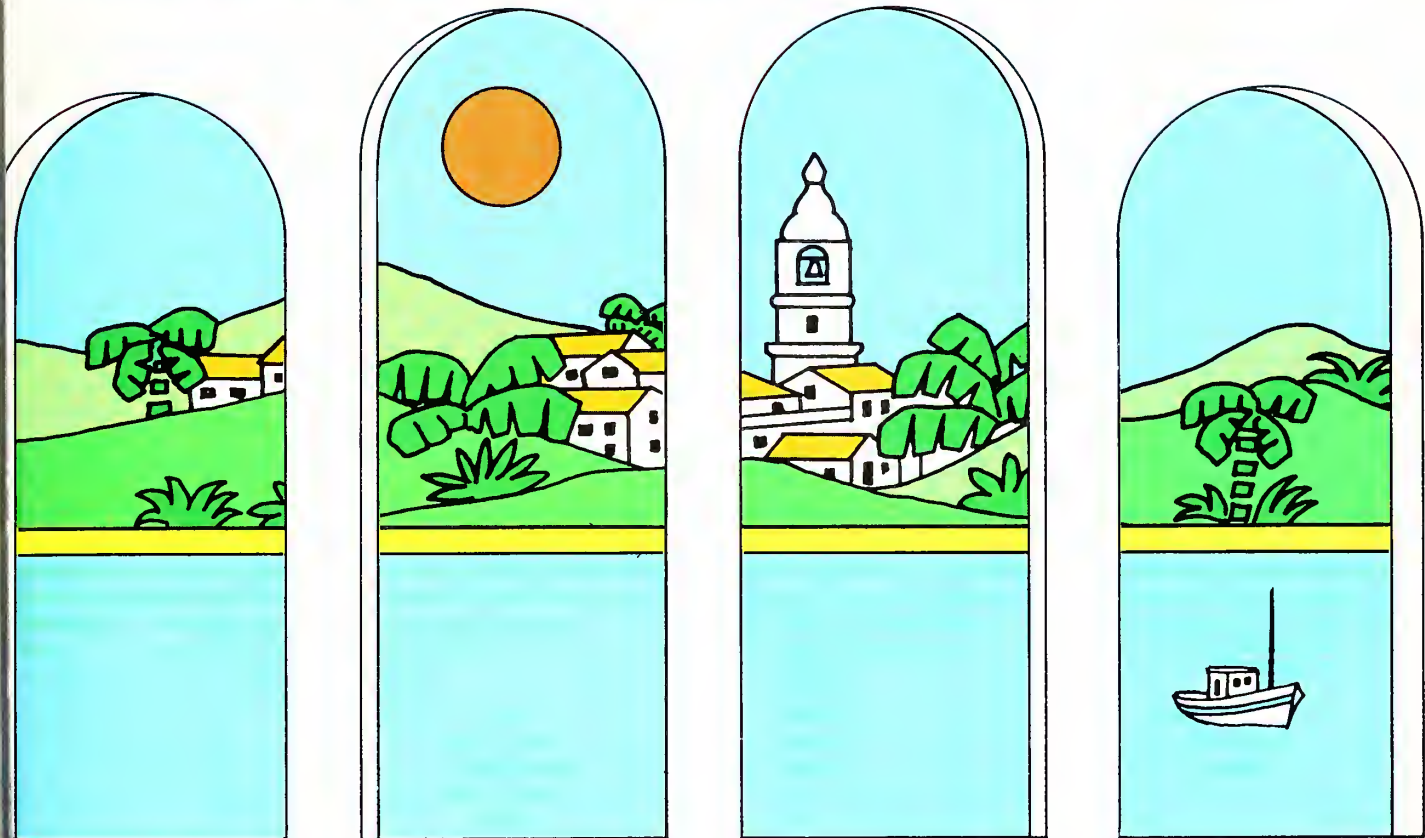
A new brow definer pencil is le crayon sourcils which comes complete with a brush to soften and groom the eyebrow. Both the brush and pencil are protected by gold metal covers. The pencil, (£3.95), is available in three colours — noir, brun chatain and gris. *Lancôme*, 14 Grosvenor Street, London W1X 0AQ.

Chemist & Druggist 10 March 1984



# VISIT THE ALGARVE

with  **BRISTOL-MYERS PHARMACARE**



Bristol-Myers Pharmacare, the new OTC Medicines Division of Bristol-Myers, is giving you the chance to win a fabulous £500 holiday to the Portuguese Algarve.

All you have to do - is send the completed order form to the address shown below by April 30th 1984. You can choose how much or how little you want to order but even if you order nothing you are still eligible for a draw.

Each entry will be given a number and our computer will randomly select one winner. Then pick the holiday of your choice and we will contribute £500. Send direct to your travel agent

Member - offer closes April 30th, 1984



**Comtrex** - is the multi-symptom cold reliever which relieves all the major symptoms of a cold - even coughing. However, Comtrex is the "all year" cold reliever as well. It contains the antihistamine chlorpheniramine maleate, renowned for its low level of sedation, making Comtrex the ideal product for the sneezing and runny nose which accompanies spring and summer colds. Comtrex is available in tablets, liquids and capsules.

**Extra Strength Duralin** - is the new 6-hour buffered analgesic for people needing **longer-lasting relief**, and because you need to take less tablets a day, Extra Strength Duralin is **cheaper on a daily basis** than many of the leading brands.

		R.S.P.	Normal Trade Price	% Profit on Cost*	Units/Sales Outer	Sales Outers Ordered
Duralin	24 Tablets	£1.10	£0.636	50%	12	
	48	£2.04	£1.180	50%	12	
	72	£2.84	£1.642	50%	6	
Duralin	16 Capsules	£1.10	£0.636	50%	12	
	36	£2.04	£1.180	50%	12	
Comtrex	24 Tablets	£1.63	£0.943	50%	12	
	48	£2.75	£1.590	50%	12	
	72	£3.39	£1.960	50%	6	
Comtrex	16 Capsules	£1.63	£0.943	50%	12	
	36	£2.75	£1.590	50%	12	
Comtrex	180ml Liquid	£1.98	£1.145	50%	6	

Send all completed entries to:  
Bristol-Myers Pharmacare, P.O. Box EH 272,  
Station Road, Langley, Slough SL3 6EB.

\* Prices may vary slightly within wholesaler.

Your Name \_\_\_\_\_

Address \_\_\_\_\_

Wholesaler Name \_\_\_\_\_

Address \_\_\_\_\_

**TOP PRESS:** To take advantage of our special £10 display incentive with every order of 4 dozen or over, **TICK HERE** ☐



## Styling mousse in VO5 range

Alberto are launching a styling mousse under the VO5 banner. There are two variants, normal and extra hold, and the 100ml cans give a minimum of 15 applications, say the makers. Normal control comes in rich burgundy cans while extra hold comes in deep blue (£1.19).

Television support worth £1m will emphasise the "lasting hold" of the product and the new commercial — style with confidence — will have 30-second bursts nationally from April. *Alberto-Culver Ltd, Houndsmill Industrial Estate, Telford Road, Basingstoke, Hants RG21 2YX.*

## Pharmagen for Christina

Christina of London, manufacturers of make-up kits ranging from a complete set of colour accent cosmetics to kits exclusively of eyeshadows or lip glosses, have appointed Pharmagen Ltd as their sole distributor in chemist outlets.

The makers are offering merchandiser (trade £49.03) and shelf display (trade £46.38) — each holding two dozen assorted kits. *Pharmagen Ltd, West Lane, Runcorn, Cheshire WA7 2PE.*

## Big spenders

Ayds and Topol smokers tooth polish are the second and third most heavily advertised products on radio according to a MEAL survey covering the three months to November 1983. With a combined spend of £500,000 the two brands are beaten only by Proctor & Gamble's Ariel Automatic with a MEAL rate card expenditure of £303,000. *Carnation Health Care Division, Danesfield House, Marlow, Bucks SL7 2ES.*

## Optique crayons

Heather and gold are the latest addition to the Optique range of double-ended "jumbo" sized crayons (£2.50) while clover and caramel have been added to the cream eyeshadow range. A new brush applicator (£2.10) comes with the two colours. This double-ended pony hair brush is said to give better results than the sponge-tipped type of applicator. *Cosmetics Optique Ltd, 6 Burnall St, London SW3.*



A Spanish time-share holiday "for life" is the first prize in a competition featured on LRC's Mangold gloves. The promotion is running until April and is on lightweight, extra and fleur gloves. Packs will be flashed and full details will appear on an in-pack leaflet which carries both a landscape photograph and a map. Entrants have to pinpoint the location of the photographic scene on the map and send this to the company with proofs of purchase. *LRC Products Ltd, North Circular Road, London E4 8QA.*

## Scotties price

A major price promotion of Scotties facial regular 150s and 200s is taking place throughout March, April and May. Packs are flashed 5p off.

Recommended prices are 150s £0.63, 200s £0.75, and both white and rainbow tissues are involved. *Bowater-Scott Corporation Ltd, Bowater-Scott House, East Grinstead, West Sussex, RH19 1UR.*

## Parador Plus

Parador Plus goes on test in the Yorkshire television region this week. Kiwi Products say they have high hopes for what they see as a new generation of disinfectants. Instead of the pungent smell of phenol normally associated with such products, Parador Plus they say is made from a totally different 'base' which allows the addition of a range of attractive fragrances. *Kiwi Products (UK) Ltd, Parkwood Industrial Estate, Bircholt Road, Maidstone, Kent.*

## Miss Pears '84

The 1984 Miss Pears photographic competition will be supported with a £260,000 package. Advertisements featuring the copyline "Is this the right age to start thinking about skincare?", and incorporating an entry coupon will appear in the women's Press during April and May.

Forms are also inside Pears soap cartons bearing a flash of the current winner. The competition is to find a girl aged between three and nine portraying natural and photogenic qualities. First prize is £1000. Closing date is June 1. *Elida Gibbs Ltd, PO Box 1DY, Portman Square, London W1.*

## Dirt Squad marches in

Dirt Squad, a stain and dirt remover currently on sale in America, is to be introduced into the UK by Copydex.

The product has a cream formulation with a citrus fragrance and contains lanolin. It is an effective remover of grease, tar and fruit, say the makers, and is non-toxic, non-flammable and biodegradable. Dirt Squad comes in two pack sizes: 115ml tubes (£1.49) and 1l tins (£6.90).

The launch will be backed by television advertising on TVS, running April 30-May 21. *Copydex Plc, 1 Torquay Street, London W2.*

## Firm action

Supplegen instant action firmer is a product to smooth out lines and wrinkles.

It is a water-based formula (£17.50) containing concentrated soluble collagen, collagen amino acids, hydrolastin, vitamin B and a blend of protein materials. *Germaine Monteil, St Georges House, St Georges Street, London W1.*

## Goya offers

Both men's and women's toiletries in the Goya range are to be supported by special offers.

The Cedarwood men's range will promote talc 100g, body splash lotion and body shampoo for £0.99, while deodorant body spray has 33⅓ per cent extra for the standard £1.40. The offers will be flashed on pack.

Aqua Manda toiletries are to retail for £0.75 across the range. Dumpbins will be available in the bright Aqua Manda orange featuring the product logo on three sides. A headcard displays the promotional prices. *Goya International Ltd, Badminton Court, Amersham, Bucks HP7 0DE.*

## Jarosil tissues

Jarosil recently introduced a range of Lycia tissues for the removal of nail enamel and face make-up together with face tonic tissues. The prices quoted in C&D, February 18, p324 were trade prices; the retail prices can be found in the March Price List. *Jarosil (Medical Products) Ltd, 267A Kings Road, London SW3 5EN.*

*Chemist & Druggist 10 March 1984*



# OSTOMISTS FEEL MORE COMFORTABLE WITH US



Coloplast cares for the needs of all your ostomy customers.

That's why mc2000, our advanced range of stoma appliances, is one of the fastest-growing leading brands.

This means more and more

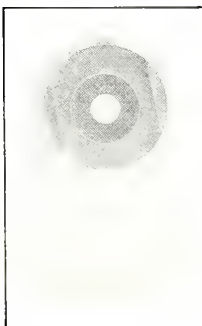
people are experiencing the unique mc2000 combination of excellent security, flexibility and comfort.

At Coloplast, we've over 25 years of experience in developing ostomy aids. We understand the

problems that ostomists face and provide a full service to help make life easier all round. Send this coupon for further details.

**mc2000**

**COLOPLAST LTD**



I would like to receive information on ordering /supplies.

I would like advice on organisations/ individuals who can help my ostomy customers.

I would like free copies of your booklets entitled "Back on Your Feet Again" to give to my ostomy customers, which provide a practical and positive guide for colostomists ☐ and ileostomists. ☐

Name \_\_\_\_\_

Pharmacy Address \_\_\_\_\_

Date \_\_\_\_\_

Coloplast Limited, FREEPOST, Bridge House, Orchard Lane, Huntingdon, Cambs. PE18 6BR.

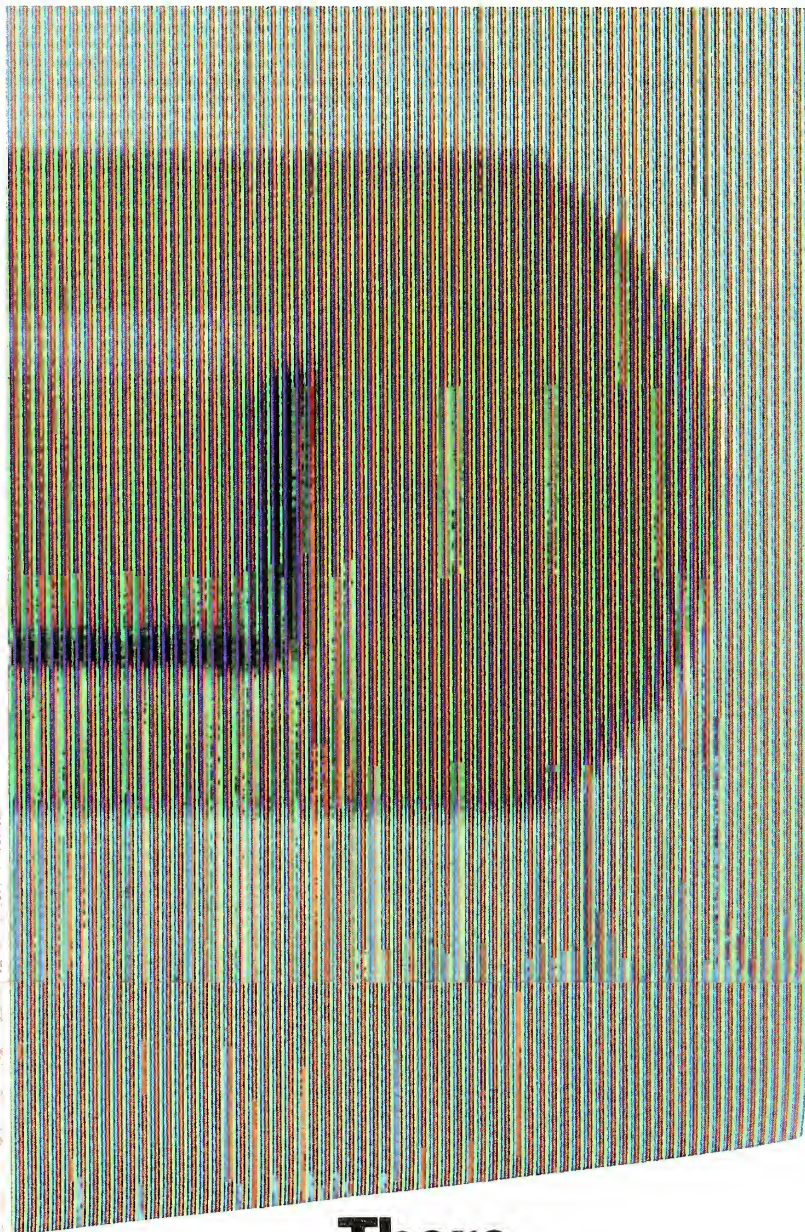
Please tick as required

☐

☐



# Where Elastoplast's major



**There.**

Elastoplast is the only brand backed by TV advertising.



**There.**

Elastoplast Clear is the most invisible plaster on the market.



**There.**

New improved Elastoplast Airstrip sticks even better than ever before.

Elastoplast, the brand leader, has taken some major steps forward. Now we offer a complete range of first aid dressings in clearly labelled, eye-catching packs and a superior product in new improved Elastoplast Airstrip.



unch will have most effect.



**There.**

We've re-designed the entire range.



**There.**

Elastoplast is the brand leader.

All this plus continued advertising support gives you no reason to stock other brands. We're spending over £1 million on Television this year, so your profits will get better throughout 1984.

**Elastoplast**

There, there, there.



# Caladryl!\*



**A single treatment  
for sunburn and insect bites.**

**An excellent recommendation for your customers.**

Data sheet available on request from Warner-Lambert (UK) Limited, Southampton Road, Eastleigh, Hampshire SO5 5RY. Tel: 0703 619791

**WARNER  
LAMBERT**

**PARKE-DAVIS**

\*Trademark R83325



## Carbomix

**Manufacturer** Penn Pharmaceuticals Ltd, Buckingham House, Church Road, Penn, Bucks HP10 8LN

**Description** Each dosage pack contains activated charcoal 50g in 61.5g of product

**Indications** Emergency treatment of acute poisoning or drug overdose. When given by mouth or intragastric tube, the product adsorbs toxic substances and prevents or reduces absorption. It is intended as a first aid treatment either before or after gastric lavage

**Dosage** *Adults:* Contents of one bottle made up to red band with water given as soon as possible after poisoning. *Children under 12 years:* Half contents of one dosage pack. Where large quantity of toxicant ingested and where there is risk to life the whole pack may be given

**Contraindications, Warnings etc**

Although not contraindicated in poisoning by strong acids and alkalis and other corrosive substances its value as a detoxicant in these cases is limited. It is poor

in binding cyanide, iron salts and some solvents including methanol, ethanol, and ethylene glycol. Should not be used in conjunction with oral emetics. May be used with parenteral antidotes such as n-acetyl cysteine or cysteamine. Should not be used with an antidote such as methionine because it is adsorbed by the charcoal. In cases of poisoning with corrosive substances the presence of charcoal will make endoscopy difficult

**Packs** 61.5g dosage bottle (£7.80 trade)

**Supply restrictions** Pharmacy only

**Issued** March 1984

## Libanil tabs

Approved Prescription Services have introduced a branded generic presentation of glibenclamide.

Libanil tablets are available as 2.5mg white, biconvex, circular tablets (100, £5.48 trade), marked "APS" on one side and "2.5 3101" on the reverse, and 5mg white, biconvex, elongated tablets (100, £9.26), marked "APS" on one side with a breakline and "5 3104" on the reverse.

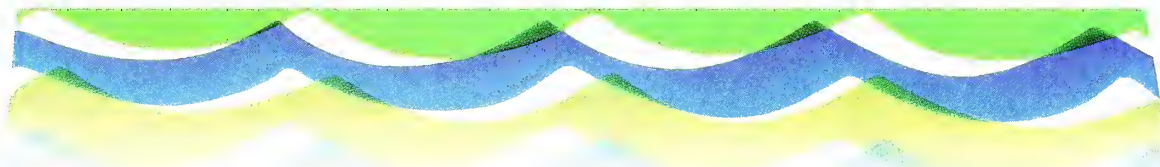
*Approved Prescription Services, PO Box 15, Whitcliffe Road, Cleckheaton, West Yorks BD19 3BZ.*

**Armour Pharmaceutical Co switch from glass to plastic:** Chymocyclar and Chymoral products are to be packed in Securitainers when stocks of glass bottles are exhausted. The change is expected to be complete by mid-April.

Armour Pharmaceutical Co have completed their new despatch/warehouse centre at Eastbourne. The address for all returned goods is now: Armour Pharmaceutical Co Ltd, Goods Inward Dept, 2 Whittle Drive, Willingdon Grove, Hampden Park, Eastbourne, East Sussex BN23 6QT. The address for orders and inquiries is unchanged: *Armour Pharmaceutical Co Ltd, Hampden Park, Eastbourne, East Sussex BN22 9AG.*

**Mixogen 1ml ampoules:** A 1ml vial of Mixogen (3 x 1ml, £2.63 trade) will replace the 2ml vial later this month. Stocks of the 2ml vial are expected to be exhausted in early April. *Organon Laboratories Ltd, Scottish Industrial Estates, New Edinburgh Road, Newhouse, Motherwell, Lanarkshire.*

## Dramamine waves goodbye to travel sickness



**Dramamine** PREVENTS TRAVEL SICKNESS FOR ADULTS AND CHILDREN  
**Dramamine**

For 30 years Dramamine has been relieving travel sickness for all members of the family – children and adults. See how success has changed us:

**New Packaging!**

Our eyecatching new pack and P.O.S. material supports your recommendation.

**New Profits!**

**New P.O.S. Material!**

Dramamine's new retail bonus will increase your profits-Ask your Searle Representative for details.

**Recommend, Sell and Display Dramamine**

and your customers can wave goodbye to travel sickness.

Searle Consumer Products, PO Box 54 Lane End Road High Wycombe Bucks HP12 4HL Searle and Dramamine are registered trademarks



**Alert him to the cough treatment  
that'll allow him to stay awake.**

A cartoon illustration of a man with a large red nose, looking tired and holding a box of Sudafed Expectorant. The man has a weary expression, with heavy-lidded eyes and a slightly open mouth. He is wearing a dark suit jacket over a white shirt and a red tie. His hands are resting on his cheeks, emphasizing his fatigue. In the lower right corner, a hand holds a box of Sudafed Expectorant, which is orange and white. The box features the text "SUDAFED EXPECTORANT FOR CHESTY COUGHS" and a small logo of a person on a horse. The background is a plain, light color. The overall style is a classic cartoon illustration with bold lines and a limited color palette.

It contains a powerful decongestant, pseudoephedrine, to ease breathing—and guaiphenesin to increase bronchial secretions, making expectoration easier.

All offer the relief  
the sufferer wants, without the  
side-effect he doesn't.



**INGREDIENTS:** SUDAFED CO TABLETS: EACH TABLET CONTAINS 500MG PARACETAMOL BP AND 60MG PSEUDOEPHEDRINE HYDROCHLORIDE BP. SUDAFED EXPECTORANT: EACH 5ML CONTAINS 100MG GUAIPHENESIN BP AND 30MG PSEUDOEPHEDRINE HYDROCHLORIDE BP. SUDAFED TABLETS: EACH TABLET CONTAINS 60MG PSEUDOEPHEDRINE HYDROCHLORIDE BP. **USES:** SUDAFED CO TABLETS, SUDAFED TABLETS AND SUDAFED EXPECTORANT ARE INDICATED FOR THE RELIEF OF CONDITIONS WHERE UPPER RESPIRATORY CONGESTION IS ASSOCIATED WITH PYrexIA OR PAIN. SUDAFED EXpectorANT (CONTAINING AN EXPECTORANT AND UPPER RESPIRATORY TRACT DECONGESTANT) IS INDICATED FOR THE RELIEF OF CONDITIONS WHERE UPPER RESPIRATORY CONGESTION IS ASSOCIATED WITH COUGH. **DOSEAGE:** SUDAFED CO TABLETS: ADULTS AND CHILDREN OVER 12 YEARS: 1 TABLET THREE TIMES A DAY (CHILDREN 6-12 YEARS: HALF A TABLET THREE TIMES A DAY). SUDAFED TABLETS: ADULTS AND CHILDREN OVER 12 YEARS: 1 TABLET THREE TIMES A DAY (CHILDREN 6-12 YEARS: HALF A TABLET THREE TIMES A DAY). SUDAFED EXPECTORANT: ADULTS AND CHILDREN OVER 12 YEARS: 10ML THREE TIMES A DAY (CHILDREN 6-12 YEARS: 5ML THREE TIMES A DAY). 1 YEARLY: 2.5ML THREE TIMES A DAY. SUDAFED TABLETS AND ELIXIR: ADULTS AND CHILDREN OVER 12 YEARS: 1 TABLET OR 10ML THREE TIMES A DAY (CHILDREN 6-12 YEARS: 75ML THREE TIMES A DAY). 1 YEARLY: 5ML THREE TIMES A DAY (CHILDREN 3-12 MONTHS: 2.5ML THREE TIMES A DAY). **CONTRA-INDICATIONS:** PATIENTS WITH KNOWN HYPERSENSITIVITY TO ANY OF THE CONSTITUENTS. 1 CONTRA-INDICATED IN PERSONS UNDER TREATMENT WITH MONOAMINE OXIDASE INHIBITORS AND WITHIN TWO WEEKS OF STOPPING SUCH TREATMENT. **PRECAUTIONS:** ALTHOUGH PSEUDOEPHEDRINE HAS VIRTUALLY NO PRESSOR EFFECTS IN PATIENTS WITH NORMAL BLOOD PRESSURE, THESE PRODUCTS SHOULD BE USED WITH CAUTION IN PATIENTS WITH CARDIOVASCULAR DISORDERS, INCLUDING HYPERTENSION. THE EFFECT OF ANTIHYPERTENSIVE AGENTS THAT MODIFY SYMPATHETIC ACTIVITY MAY BE PARTIALLY REVERSED BY THESE PRODUCTS. CAUTION SHOULD ALSO BE EXERCISED IN PATIENTS TAKING OTHER SYMPATHOMIMETIC AGENTS, SUCH AS DECONGESTANTS, APPETITE SUPPRESSANTS AND AMPHETAMINE LIKE PSYCHO STIMULANTS. THE EFFECTS OF A SINGLE DOSE ON THE BLOOD PRESSURE OF THESE PATIENTS SHOULD BE OBSERVED BEFORE RECOMMENDING REPEATED OR PROLONGED TREATMENT AS WITH OTHER SYMPATHOMIMETIC AGENTS. CAUTION SHOULD BE EXERCISED IN PATIENTS WITH PROSTATIC ENLARGEMENT OR BLADDER DYSFUNCTION. IN SEVERE HEPATIC OR RENAL DYSFUNCTION A SINGLE DOSE OF THESE PRODUCTS SHOULD BE GIVEN AND THE PATIENT'S RESPONSE USED AS A GUIDE TO THE DOSE/AGE REQUIREMENT FOR FURTHER ADMINISTRATION. THE ANTIBACTERIAL AGENT FURAZOLIDONE IS KNOWN TO CAUSE A PROGRESSIVE INHIBITION OF MONOAMINE OXIDASE AND ALTHOUGH THERE ARE NO REPORTS OF HYPERTENSIVE CRISES, HAVING OCCURRED, IT SHOULD NOT BE ADMINISTERED CONCURRENTLY WITH THESE PRODUCTS. **SIDE AND ADVERSE EFFECTS:** SUDAFED CO TABLETS ARE UNCOMMON IN SOME PATIENTS PSEUDOEPHEDRINE MAY OCCASIONALLY CAUSE INSOMNIA, A FIXED DRUG ERUPTION TO PSEUDOEPHEDRINE, TAKING THE FORM OF ERYTHEMATOUS NUMMULAR PATCHES HAS BEEN REPORTED. THERE IS NO CONCURRENCE FOR PARACETAMOL. ISOLATED CASES OF THROMBOCYTOPENIC PURPURA, METHEMOGLOBINEMIA AND AGRANULOCYTOSIS HAVE BEEN RECORDED. NEPHRITIC SYNDROME EFFECTS ARE UNCOMMON AND HAVE NOT BEEN REPORTED IN ASSOCIATION WITH THERAPEUTIC DOSES, EXCEPT AFTER PROLONGED ADMINISTRATION. **COST TO PHARMACY:** SUDAFED CO TABLETS 12 TABLETS £0.60 (PL3 0157), SUDAFED EXPECTORANT 100ML £0.77 (PL3 0158), SUDAFED TABLETS 12 TABLETS £0.56 (PL3 5062), SUDAFED ELIXIR 100ML £0.71 (PL3 5062). **WELLCOME CONSUMER DIVISION** THE WELLCOME FOUNDATION LTD., CREWE, CHESHIRE. FURTHER INFORMATION IS AVAILABLE ON REQUEST FROM A LOCAL MARK.



# Leap year '84 and pharmacy in-fights

**David Morgan, a community pharmacist from Guildford, takes a cautionary look at the leap frogger and his near-relatives. Many of the breed do look before they leap, he claims, and some have parasitic tendencies.**

Ten or fifteen years ago, one of the high-sounding phrases that reverberated around pharmacy was "planned distribution." It was supposed to encompass the realisation of an enlightened establishment that there were too many pharmacies in some areas — usually the urban areas — and not enough in others, the rural.

It was thought there would be an increase in doctor dispensing if pharmacy did not put its house in order and attempt a more rational location of new pharmacies. An entirely laudable and praise-worthy attempt was made to introduce the concept of planned distribution. But, as we all know, for such a campaign to be effective legislation would be needed to "direct" new pharmacies to deprived areas, and to "discourage" them from going where there already was a satisfactory service to the patient.

Neither the Pharmaceutical Society nor the Family Practitioner Committee can refuse either to register a new pharmacy, or to grant it the mythical contract to dispense NHS prescriptions. Every new pharmacy has to be registered by the Society if it satisfies the legal requirements. And, equally, the FPC has to grant permission to dispense for NHS patients.

No government is likely to introduce the necessary legislation — which would have created a mine-field of anomalies — and no

profession, who will open a new pharmacy in direct competition with an established pharmacy, in a deliberate attempt to close that pharmacy down. No question of whether the area needs another pharmacy; it is dog eat dog; the survival of the fittest, and the weakest go to the wall.

I am not talking about the ever-present

**'The result is two small pharmacies fighting each other for the business with neither of them doing brilliantly, and the bottom often dropping out of the original good pharmacy business.'**



leap-frogger we all know about. Rather the person who looks at an often successful business doing a turnover he puts at £250,000 plus. He says, "I'll have half of that," and opens up a few yards away. The result is two small pharmacies fighting each other for the business with neither doing brilliantly, and the bottom often dropping out of the original good pharmacy business.

All's fair in love, war and business, you say. If you can't stand the heat, then get out of the kitchen. All very well until it happens to you. In fact, so fast is the situation deteriorating that, as things stand now, there is not a single community pharmacy

Sometimes wholesalers are threatened by existing customers with closure of their accounts if they support the newcomer (inevitably he will be serviced by some one else in any case). Indeed, it is said of one famous wholesaler that they would serve the devil himself if he had MPS after his name.

Many pharmacists are afraid to employ certain locums in their businesses in case confidential details of turnover and prescription numbers are revealed which leads either to the locum, or one of his pals, opening in opposition down the road.

Even advertising a business for sale is a risky matter, for then details are revealed of turnover, etc. This could lead to a competitor opening nearby, often satisfied with a smaller return and quite happy to see the original pharmacy decline.

I believe that unless pharmacy is to become a total rat-race some attempts must be made by the Society and the National Pharmaceutical Association to admit publicly that the problem exists — which as

yet they seem loath to do (except in private). Then by discussion and debate they should at least attempt to introduce some sort of order in to a situation which threatens to become the most explosive issue of the year.

Restraint of trade, in 1984, is a dirty word. And having a desire to see the problem solved, and actually solving it, are two different things. Being totally realistic, I cannot see any effective action being taken to alter the unfettered right of any free individual to open up in a business of any sort, wherever he or she chooses. And, if it happens to be in opposition to someone else, then so be it. It is not that the newcomer's professional and commercial ethics are wrong, merely different.

Personally, I would not want to open up an expensive pharmacy right on the doorstep of another business. I believe there are better opportunities elsewhere. But it has to be faced that there are many who do not agree and, in a free society, we are unlikely to see the situation change in the future, near or far.

It used to be said that pharmacy was fighting the supermarkets, the grocers and the drug stores. In 1984, it appears that pharmacy is now fighting pharmacy. What a shambles! And, what with threatened clawbacks, 50 per cent cuts, smaller discounts, etc — what an outlook!

**'It used to be said that pharmacy was fighting the supermarkets, the grocers and the drug stores. In 1984, it appears that pharmacy is now fighting pharmacy. What a shambles.'**



one is ever likely to ask for it, especially under the present government. Yet strangely, could a situation now be arising where some sort of action could be deemed necessary, unless community pharmacy is to degenerate into an undignified scramble?

In the last few years we have seen a new breed of pharmacist come into the

anywhere that is not threatened by this development. And that, my dear colleague means you. The wayside is littered with those who say, or rather said: "It could never happen to me. No one would ever think of opening another pharmacy around here, the area would not support the two." Oh Yes? I have heard that before.



## Looking for a contract with a future

**The regulation and future options of the profession are looked at by Kenneth Sims, a proprietor pharmacist from Parkstone, Dorset.**

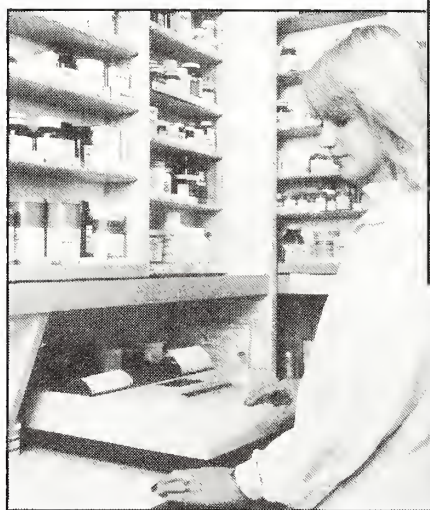
At the latest LPC conference the proposition that the NHS contract should be with the pharmacist was agreed by a majority and should now be the basis of PSNC negotiations for a new contract.

Nothing, in my view, has so diminished our profession as the fact that anyone who wishes can become a dispensing contractor to the NHS by opening or buying a pharmacy. Of course a pharmacist has to be employed, but his position is then subservient to those with the capital. The resulting divisions of interest have effectively sabotaged the sense of unity essential for the strength and security of a profession, and encouraged the growth of multiples which became more powerful because of the economies of scale.

The substantial profits from direct buying, always seen as legitimate, served to attract all sorts of entrepreneurial capital to pharmacy. It is ironic that only when the last 30 per cent of contractors were seen to get comparable discounts, did the Government decide to insist on a true cost for the calculation of margin. For the first time all contractors were in the same boat.

While I think placing the contract with the pharmacist will represent a turning point in our profession, the ownership question is premature. Do you believe everything would be alright if we owned the pharmacies? There is nothing wrong with this emotional gut feeling, so long as it is recognised for what it is. The way people feel which ultimately produces reform and change. It is worth examining the options open to us.

Currently our universities are turning out graduates, experts in drugs, who expect to get work where their expertise will be used. The Society tells us we have a new role as advisors to doctors and the lay public and urges us to get out of the dispensaries to be seen at the counter. Vestric tell us we must run shops selling traditional merchandise alongside our dispensaries. The NPA has been saying the same thing for years.



As it was, as it is now, but what will it be in the future

In 1967, in dismissing the Society's appeal against the Dickson judgment, Lord Denning said that while the Society controlled the professional activities of pharmacists, pharmacy is not like other professions. A man cannot live by pharmacy alone...he had to go into trade to pay his way. He is both a pharmacist and a trader...And then he is called a 'chemist.'

Those of us actually in business, find we are pragmatists varying our tactics as best we can, in the face of effective retail competition and a paymaster Government determined to reduce a high drugs bill by purely fiscal means, presumably because it feels unable to tackle the problem at source — ie the prescribers. The fact that squeezing margins too hard could destroy the profit base essential for a successful drugs industry in Britain seems oddly overlooked.

### The professional gap

At first, then, it is worth looking at ways of closing the gap between pharmacist and GP. The relationship is a symbiotic one and should be recognised, so that where there is surgery with two or three doctors a pharmacy ought to be attached or nearby — with a communicating door? A realistic situation surely, in one step eliminating the leapfrogger and making for easy contact.

Right now it is suggested we should start patient records. Somewhat idealistic, in light of the present siting of pharmacies and the random nature of patients visits for dispensing? Expensive in time and or computer capacity for what would always be incomplete. If we were to close to the surgery, access would be simple and our feedback to doctors invaluable. Repeat scripts too, currently mishandled by untrained staff, could well be handled by the pharmacist — who is far more likely to register unwanted side effects than either the receptionist or doctor himself. With larger group practices consortia-run pharmacies, with several pharmacists, would appear to give a better service.

However, having led you up the garden



path of the so-called "ethical pharmacy" let us look just a little further on. We make play of our role as early warning posts and final safeguards against prescribing error, and specialist compounders. With the Society urging the adoption of sealed pre-packs for drugs the dispensing function can be seen as one primarily of storekeeping. Our manipulative role is dead, or nearly so. When the doctors' computers are universal, does anyone doubt that on making his diagnosis, the doctor will receive up-to-date accurate information on treatment, dose and drug interactions from his desk-top terminal? Our close position then will automatically be reduced to that of technician attached to surgery, performing boring repetitive handouts of prepacks, on which the necessary warnings or instructions will already be printed. There is no future in it for the trained pharmacist.

### Real service

The solid appreciation of pharmacists by the community, which we are just beginning to realise and to make properly acknowledged by our publicity campaigns, is based on the years of consistent service we have given. Its value arises from the unique split between the professional aspects for which our training fits us, and the commercial. Unique in that our commercial dealings are constrained by the same dictates of professional caring.

It is we who have consistently under-rated our value. If we are to survive we have to be wary of the narrow job description accepted by too many, including the redoubtable Lord Denning. Community pharmacy is the whole spectrum of legitimate trading and dealing in drugs. Our only future lies in wide acknowledgement of the value of having people with our qualifications available in distributed sites where doctors may serve for limited hours or not at all.

### Community service

If this is seen to make sense then our Society, which under its charter is the only body which can represent pharmacists, must concern itself intimately with plans to ensure distribution and survival. Since it cannot control or help companies it has been hamstrung for years. The PSNC, representing contractors who can be individuals or companies, is also debarred from a wider role, unless it can fulfill the

*Continued on p463*



# QUICKIES TAKE OFF

quicker than ever!



Sales up 27% last summer in peak selling season.

Beecham plan to beat that record this year with new modern packaging that's strong on impact.

The new advertising campaign, with 3 times last year's spend, breaks in May editions of all top selling women's magazines. Runs right through summer holiday period.

Exciting new deals and display units for you! Contact your Beecham representative for details . . . but quick!

## Quickies

**Simply great movers—stock up now!**



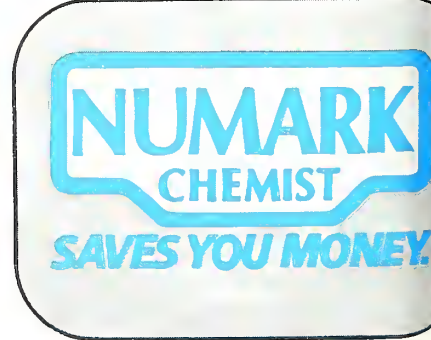
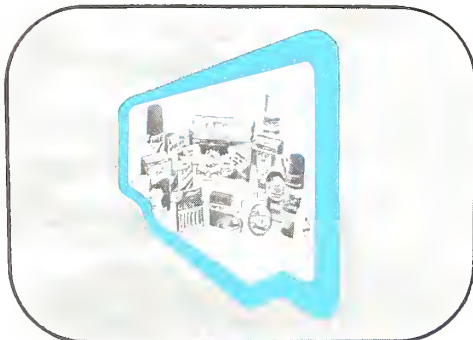
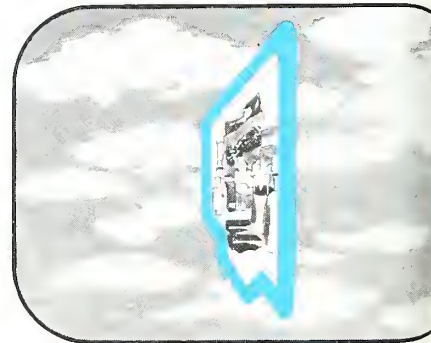
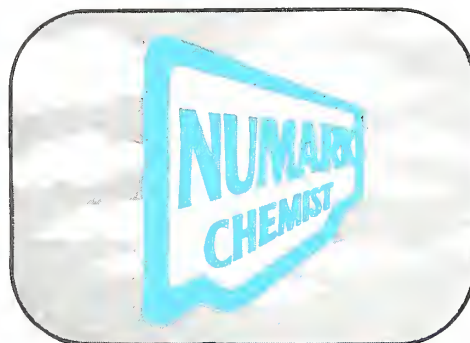
# MAJOR SPRING PROMOTION.

*Family Favourites* is Numark's biggest ever promotion, with £200,000 in advertising, merchandising and competition prizes.

Phase 1 is April 9th to 21st, Phase 2 May 14th to 26th.



Numark's second campaign on TV-am appears at the prime time to reach most spenders, starting with two fixed time spots at 7.55 and 8.10am on Monday April 9th.



Abbreviated impression of television commercial.



# FAMILY FAVOURITE



## PRESS ADVERTISING.

Dominant advertising in national and regional newspapers that will reach nearly 11 million housewives.



## £8,000 CASH PRIZE COMPETITION.

This free, easy-to-enter competition will really attract customers, with cash prizes for Numark Chemists too.

## EYE-CATCHING MERCHANDISING MATERIALS.

Numark Chemists receive comprehensive kits of high quality window and shop display materials to help boost sales and increase profitability.



**MAKES YOU MONEY.**

For further information contact your local Numark Wholesaler or Numark Central office, 51 Boreham Road, Warminster, Wilts. BA12 9JU. Tel: 0985 215555.



# Millions of cystitis sufferers have been waiting for Cymalon.



Cymalon is a new medicine developed by Sterling Health to help relieve the misery of cystitis symptoms.

That's great news for cystitis sufferers. And a great new opportunity for you because Cymalon is only available through pharmacies.

The only complete 48-hour treatment for cystitis, Cymalon means increased sales for you from an entirely new therapeutic area. By alkalinising the urine, Cymalon gives effective symptomatic relief from cystitis.

By stocking it, you get the chance to help millions of new customers.

**SterlingHealth**

Cymalon is a registered trade mark.



*Continued from p458*

wishes of the LPC's by getting the contract with the named pharmacist. At which point the Society and PSNC may be able to take off. I would not say merge, since many consider they would not want the dead hand of the PSGB laid on!

I am concerned at the real isolation of the individual pharmacist. Totally vulnerable. Yet it has always seemed to me there was a case for a combination of resources and manpower in such a way that an area rather than a group of shops could be thought of as a unit in terms of pharmaceutical services. Already we have situations where, to prevent leapfrogging, consortium pharmacies have been set up in health centres. Such centres could easily be manned by night staff to provide a genuine emergency service over a 24-hour period.

If the pharmacist contractors, under a new contract, were masters of the dispensing situation, it is possible to see an interchange of master pharmacists, so that your suburban community man might find it an enriching experience to spend a day a week in the consortium dispensary. Being seen there by his shop customers would enhance the vision of professional team work, with easier doctor contact also.

#### Advantages of co-operation

In areas where several small one-man shops struggle in useless competition, considerably worked out purchase or amalgamation might not only prove a relief to the older proprietor, but could give easier hours to the men and women of the whole group. Staff training would be infinitely easier and better in content. In old or new developing areas pharmacies could be helped into viability by the group.

Partnership — initially in an area contract — rather than individual shops, would encourage our security by providing incentives for those who wanted to get on, at the same time offering part-time posts and group pensions with directorships for those who are retiring. Our value to the community lies in our service range.

We should therefore look to the widespread distribution of freestanding pharmacies (as health advice centres?) with the responsibility for a first-class service falling on area groups, and assessed by local branch meetings. The Society must obtain a charter which will allow it the right to ensure standards in a way impossible at present. Our inspectors must have the power to withdraw premises registration where laid-down conditions are not met. I do not believe in the exercise of free enterprise, or responding to market opportunities, when the result is that smart operators can destroy fellow professionals by leapfrogging, breaking rotas, so as to corner all dispensing, operate from filthy

premises, sell anything they like, or chance their arm with unscrupulous advertising.

These are a few ideas, none particularly new or all my own. But whatever our ideas we have work to do correcting the errors of 100, 60, 40 years ago. I think it's a waste of time to argue about whether companies are or are not in the best interests of community health. As a first step our legal department at Lambeth could be set to develop a series of ideal charters designed not so much to fit within the constraints of past legislation or

tradition, but to break new ground to try to give us the security to serve the community properly as a self disciplined profession

But despite all the long faces I know we shall survive. We are tough and resilient, and beginning to get organised. If we were prepared to give up some of the entrepreneurial freedoms, then we would achieve new ones in terms of better hours, working conditions and professional prospects, and an unassailable position which could be the envy of many

# Everyone's a Winner!

But one lucky person will win a fortnight's holiday for two on the enchanting island of St. Lucia this winter, AND have £500 to spend.

All you have to do is to order the attractive new ENTEROSAN dispenser from your Ashe representative, and keep it on display throughout the summer. This will entitle you to enter the ENTEROSAN Competition that could not only win you this fabulous holiday, worth more than £2,000 in total, but could also enable your staff to share an extra £250.

Best of all, though, this dispenser will help you sell more ENTEROSAN, and as it's three times more profitable than liquid kaolin and morphine, you're on a winner anyway!

#### Order from your Ashe Representative

Sole distributor  
David Anthony  
Pharmaceuticals Limited





# 'Fearful lapse' leads to a reprimand

**A Scottish pharmacist who took large quantities of an addictive drug was reprimanded by the Statutory Committee last week.**

Mr James McWilliam, the only pharmacist on the Isle of Mull, said he started taking a tincture of chloroform and morphine to ease stomach trouble. "Then, it became a habit, like smoking, and I found it difficult to stop," he said. Committee chairman Sir Carl Aarvold said that following this "fearful lapse" in an otherwise blameless career, Mr McWilliam had received hospital treatment and had run his pharmacy without complaint for the last three years.

Mr McWilliam appeared before the Committee following his appearance at Oban Sheriff Court in June, 1982, when he

was fined a total of £1,100 and admonished after pleading guilty to three charges of contravening the Misuse of Drugs Regulations and breach of the peace.

Mr Josselyn Hill, for the Society, said police were called to a disturbance at Mr McWilliam's home one night in February 1981, after neighbours complained that he was shouting and banging doors. Police Constable Archibald Stevenson said he warned Mr McWilliam about his conduct and then kept observation from a neighbour's house. He saw Mr McWilliam open his door, look towards a neighbour's house, shout abuse and then slam the door. This happened some 16 times in two hours. Officers questioned Mr McWilliam and noticed a strong smell. They found a bottle containing enough morphine to make it

subject to the Misuse of Drugs Act.

Later, at his pharmacy in Main Street, Tobermory, they found a number of unlabelled bottles containing a mixture of tincture of chloroform and morphine. An examination of the books revealed that eight litres of the tincture were unaccounted for between September 1980 and February 1981.

Mr McWilliam had admitted in court he had used the morphine unaccounted for in the Drugs Register to manufacture the tincture he was taking. Mr Hill told the Committee. Det Supt Charles Rogers, head of Strathclyde Drugs Squad, said he believed Mr McWilliam would eventually have become a morphine addict. Following hospital treatment in February 1981 he had been leading the life of a model citizen, running his pharmacy with no cause for complaint.

Mr McWilliam told the Committee he had a bad neighbour who used to complain about minor things. "He made his dislike for me very apparent."

*Continued on p469*

**L**ast year over ½ million men and women made sure Red Kooga remained Britain's biggest selling Ginseng.\*

So this year, Red Kooga are making certain that this outstanding market leadership will grow even more, with heavy advertising expenditure throughout 1984.

In national papers, women's magazines and health periodicals we'll be telling your customers how only the world's finest Korean King



## You can rely on Red Kooga

Ginseng – known for thousands of years as "The Root of Life" – goes into Red Kooga.

And we'll be building on the flying start made by our new Selected Multivitamins and Minerals with Natural Vitamin E. Like Britain's favourite Ginseng, our Multivitamin is made from the finest ingredients. But

\*Over 50% market share – Independent trade audit

unlike most other brands, it contains no artificial flavouring, colouring or sugar.

Red Kooga Ginseng and Red Kooga Multivitamins are the dietary supplements your customers can rely on.

Can they rely on you to stock them?





# PURE NATURAL BEATSON GLASS

## The timeless container

Glass, the natural choice for pharmaceutical tablets and liquids. Glass containers enhance your products perfectly. Select natural glass from our stock range of bottles in amber, white flint or made to your own requirements.

Beatson Clark plc 23 Moorgate Road Rotherham South Yorkshire S60 2AA Telephone Rotherham (0709) 79141 Telex 54329



**Beatson Clark**





If you're going  
to help your  
customers  
through an  
anxious time,  
it helps  
to have some  
experience  
behind you.



HIGH  
SENSITIVITY

Predictor

Home pregnancy test



Simple  
Reliable  
Accurate



CONFIRM

Home Pregnancy Double Test

Gives you two separate tests  
for total reassurance

Women aren't all the same. So they don't all  
feel the same about pregnancy testing.

That's why Chefaro manufacture both a single  
and double test.

Predictor - the most sensitive pregnancy test  
available - relied on by thousands of women over  
the last ten years.

And Confirm - for women who prefer the  
reassurance of an extra check on the result.

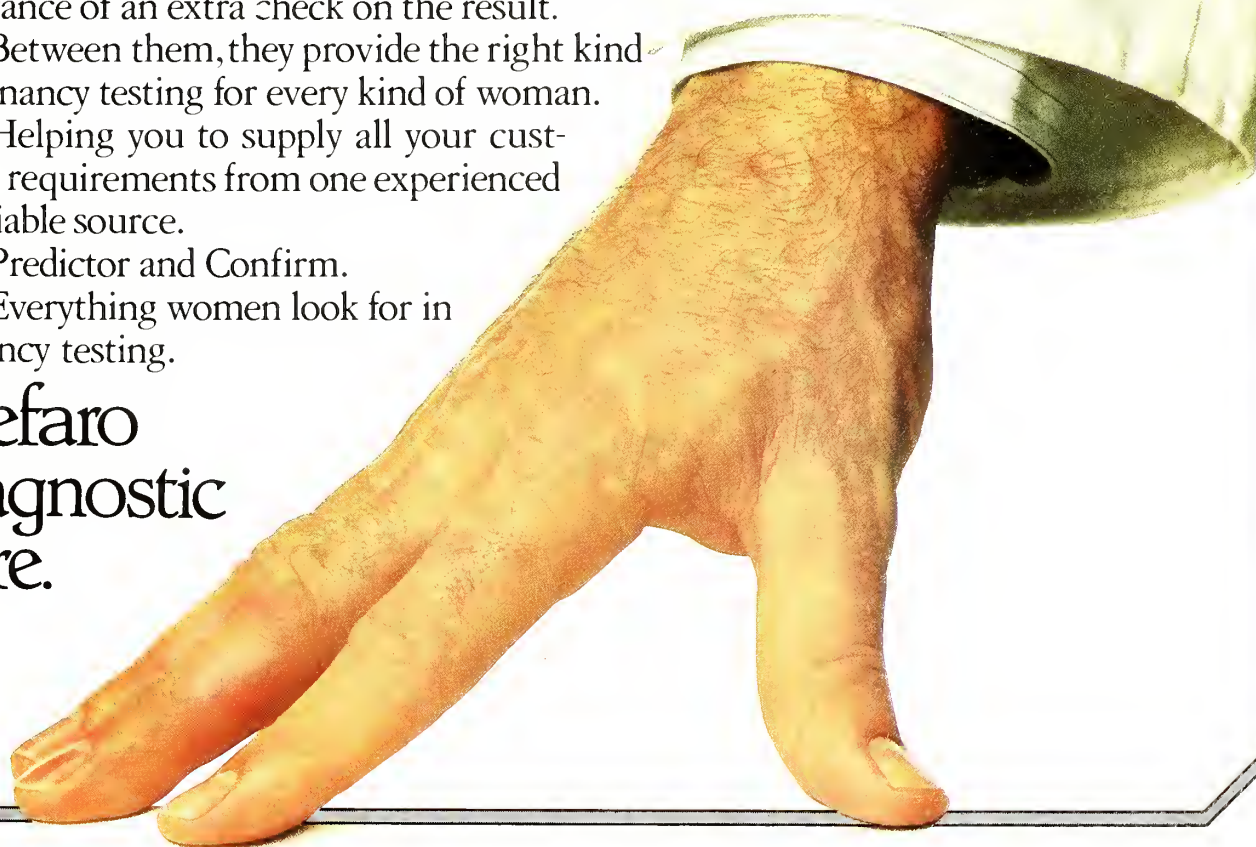
Between them, they provide the right kind  
of pregnancy testing for every kind of woman.

Helping you to supply all your customer's  
requirements from one experienced  
and reliable source.

Predictor and Confirm.

Everything women look for in  
pregnancy testing.

Chefaro  
Diagnostic  
Care.







# Metatone Tonic

## The extra help they need.

When your customers are feeling run-down or recovering from illness, METATONE is just the tonic to recommend.

Its unique vitamin and mineral formula speeds recovery after illness and helps to "pick-you-up." That's why doctors prescribe METATONE more than any other tonic.

**Metatone**<sup>\*</sup>

The extra help they need.



**WARNER LAMBERT**

Data sheet available on request from:  
Warner Lambert (UK) Limited, Southam Road,  
Southam, Warwickshire CV40 3JF. Tel: 0700 519731



## Drugs sent to charity in Africa

**A Liverpool pharmacist was found guilty of professional misconduct by the Statutory Committee. Mr Ronald Goodman was found to have allowed drugs to be disposed from the pharmacy at Whiston Hospital, Merseyside, well within their expiry dates without consent and proper accountability.**

Committee chairman Sir Carl Aarvold directed that Mr Goodman should be admonished. He said absence of firm control and clear instructions by Mr Goodman led to drugs with expiry dates some six months ahead being sent to a charity for use in Africa.

The Committee decided that the hospital's principal pharmacist, Mr David Wolfson, bore no responsibility in the matter, and a similar charge against him was dismissed.

The two men were each cleared of professional misconduct in relation to four further charges: supplying large quantities of medicinal and other products free of charge contrary to instructions; failing to prevent such supplies continuing after the area health authority had drawn their attention to it; being lax over security in the hospital's pharmacy; supply by Mr Wolfson of 120 tablets to Mr Goodman without a doctor's prescription.

Sir Carl said irregularities came to light when the chief auditor carried out a stocktaking exercise in January 1981. He found more than 1,000 prescriptions or orders in a box marked "Staff", for which no charges had been made for dispensing of medicines. Mr Goodman admitted irregularities occurred in the dispensing of medicines to doctors and nursing staff, said Sir Carl. Mr Wolfson knew of this long-standing practice but did nothing about it. "He took it to be the policy of the

management committee." Both men denied having seen official circulars on the subject.

But Sir Carl said: "We are quite satisfied that they ought to have known. It is no answer for people in a position of responsibility to close their eyes to the obvious."

Both men pointed out that the system had been operated from well before their appointment; it was well known to the area health authority and had been used by at least one high official.

Sir Carl said there was no evidence that, before the audit, the men were directly instructed to stop dispensing free prescriptions to hospital staff.

It was a system deserving criticism, he said. "The irregularities must have been obvious to everyone concerned; but they were accepted, and no one seems to have taken any notice." The faults were a failure of good and effective management but did not amount to professional misconduct.

On the charge alleging that the two men failed to prevent such supplying to continue after the AHA had drawn their attention to it, the Committee said they were not satisfied that this had been proved. The Committee further decided that it had not been proved that the men had failed to do what they could to keep the pharmacy as secure as possible. There was no failure by them in this which could amount to professional misconduct.

Both men agreed there should have been a prescription charge when Mr Wolfson supplied 120 tablets to Mr Goodman. Said Sir Carl: "It was understandable in the circumstances and we do not find it amounted to misconduct."

The chairman warned against the acceptance of any custom or practice without criticism. The irregularities and difficulties exposed in the case would have come to the attention of all authorities responsible for proper use of NHS funds. Sir Carl stressed that there was no suggestion of fraudulent behaviour by the pharmacists or that they made any money out of their activities.

## Accident led to addiction

**A pharmacist from Patcham told the Statutory Committee that he became addicted to cocaine and heroin after a road accident.**

Mr Brian Murphy was appearing before the Committee for professional misconduct. This arose out of his appearance at Lewes Crown Court in September 1982, when he received a conditional discharge for stealing and illegally possessing cocaine and heroin.

Mr Josselyn Hill, for the Society, said Mr Murphy abused his trusted position by stealing cocaine and heroin from pharmacies where he was employed and then "snorting" them. Detective Constable Clive Brind said he interviewed Mr Murphy in May 1982, and the pharmacist told him he started using the drugs after being knocked down by a lorry in October 1980.

Mr Murphy told the Committee he was working very hard as superintendent and manager in a Brighton pharmacy that was open 365 days a year from 9am until 10pm, when he had the accident. He received a broken shoulder, collapsed lung and eight broken ribs. He returned to work too soon, took stronger and stronger pain-killers then moved on to cocaine and heroin.

He was asked to resign in June 1981 but he soon got a job at the Peacehaven Pharmacy where he carried on stealing and using the drugs. In May 1982, he concocted a story to get the keys to a friend's shop in Patcham, where he had worked as a locum, and stole some more drugs. He was seen by police a few days later.

Mr Murphy said that over the next three months he had beaten his heroin addiction. He was unemployed from May, 1982, until last July. Since then he had occasional employment as a locum.

The Committee reprimanded Mr Murphy. Chairman Sir Carl Aarvold said he and his colleagues had been impressed by Mr Murphy's frankness, and were pleased he had freed himself of addiction.

*Concluded from p464*

Giving the Committee's judgment, Sir Carl said: "We have heard nothing but praise for Mr McWilliam, except for that fearful patch in 1980-1981, when for reasons I don't think he understands, he was consuming excessive quantities of tincture of morphine and chloroform.

"He has overcome his weakness and has restored to himself his pride, confidence and fine character that he was in grave danger of losing." A reprimand would mark the Committee's disapproval.

## Drinking and dispensing

A Liverpool pharmacist who started drinking when her marriage began to go wrong and continued taking alcohol to help her after an operation was often under the influence of drink while working as a locum, the Statutory Committee heard.

Mrs Isobel Roberts, of Blundellsands Road West, Liverpool, was accused of misconduct. It was alleged that on a number

of occasions Mrs Roberts was incapable of carrying out her duties as a pharmacist due to being under the influence of drink and/or drugs.

The chairman, Sir Carl Aarvold, said there was a potential danger to the public, which Mrs Roberts had fully and frankly admitted, and misconduct had been proved. Since 1982 she had done her best to overcome the problem, but the danger was still there.

The Committee adjourned the matter for 12 months to enable Mrs Roberts to prove her claim that she had now given up her drinking habits.



An important announcement on head louse eradication

# The Right Approach

\* Suleo-C shampoo contains carbaryl - the only human insecticide without a single reported case of louse resistance

\* Suleo-C shampoo is an effective pleasant-to-use alternative when lotions are not tolerated

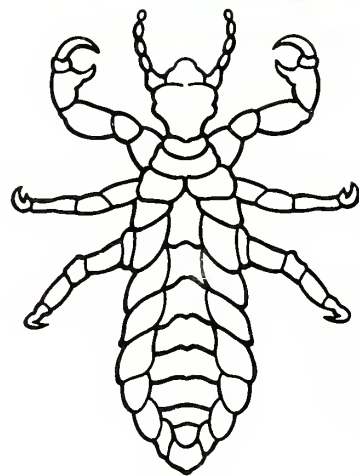
Carbaryl is a potent insecticide. You can help to retain its efficacy by -

- ensuring that users read the instructions inside every pack, since incorrect use of insecticides may encourage resistant strains
- storing Suleo-C shampoo away from heat



# SULEO-C shampoo

with carbaryl 0.5% w/w



## the EFFECTIVE alternative to lotion treatments

Another guaranteed product from International Laboratories, Wilsom Road, Alton, Hants GU34 2T.



# Computers – the chip on my shoulder

In 1968 I decided to explore the possibilities to giving up a secure £2,000 a year as a Boots manager for the uncertainties of running my own business. On November 1 of that year, I took over Wallace Clark (Chemists) Ltd in Hedon, six miles east of Hull. It did not take me long to realise that I had made the right decision and I have said many times over the years that I would not go back to being an employee.

Fifteen years later on October 31, Wallace Clark sold the business to Sellers Dispensing Chemists Ltd and I was once more a manager. The Editor feels that readers will be interested in the reasons behind my abrupt change of direction. Some of the reasons are family ones and whilst obviously influencing my decision, are not relevant here. Suffice it to say that we felt like a change of circumstances and with the extra work I am planning to take on, something had to go.

## Wrapped up

It is so easy to become so wrapped up in business that the family suffers and before you know it you have missed out. I learned a salutary lesson in March when I was laid low by a nasty attack of shingles. At one time I could not see at all. Although the pharmacist in me said that my left eye was not affected and had only closed out of sympathy for the right, I could not help thinking about going blind. Apart from not being able to dispense, even the everyday things like driving to work and back would become impossible. As I recovered I decided to grab the chance that was slowly presenting itself to me and do what I wanted with my working life. To see how this opportunity has arisen, we must go back several years.

C&D published an article on the POS system I was running my pharmacy, a system that was, at the time, quite revolutionary. Thus began a small but positive side career in pharmacy and retail computing.

One of the first things that happened was a sudden invitation to the inaugural PIP code meeting and subsequent membership of the working party. I was jointly sponsored by Independent Chemists Marketing Ltd and the National Pharmaceutical Association both of whom rightly withdrew their support when I became involved with a company selling

## Roger King, RPA vice-chairman, describes his roots in retail computing and his hope to set up a computer consultancy.

systems. I learned my lesson the hard way and that was that if I wanted to retain my credibility I had to remain independent: I have done so ever since. However, I had the chance to meet a lot of people and it has helped broaden my outlook.

In spite of several promises, I have not made any money worth talking about but I have made some friends and it has been fun most of the time. The saddest thing to involve me as a result of the article came from Brazil. I had a phone call one afternoon from Holland from a gentleman called Raymond Lutz who had been given a copy of the relevant C&D. He was running a very large family business in Brazil comprising drug stores, photographic shops, motor accessories and other products in a larger number of branches. He had recently inherited the job and with it a computer. Unfortunately the computer had no programs and so he imported a programmer who then asked him what he wanted to do with the computer.

Raymond and I had two meetings to discuss his problems and he then asked me if I would like to take my family to Brazil for a month for a working holiday. He also asked me if I would act as his European agent for exporting pharmaceuticals etc to Brazil. I agreed readily to his suggestions and we were expecting the air tickets when I heard of his death.

I never did learn much of the facts but I was given to understand that his company plane had been shot up on the runway by terrorists and his home broken into and the rest of the family murdered. I spent many hours trying to find out what happened but to no avail. However, as my wife said, we could have been there at the time!

When I first started trying to put a computer stock control system into my pharmacy, those who knew about it considered me somewhat eccentric and those were the polite ones! There were times when my staff only went along with it to humour me and I must admit that there were times when I thought I must be crazy. But I picked up a lot of experience which

suddenly became of interest to others.

My first speaking engagement, other than a couple of seminars, was overseas. I made my visit to the Republic of Ireland for the Irish Pharmaceutical Union Congress and enjoyed the wonderful, spontaneous hospitality of the Irish. Other engagements have followed by since I am basically just a community pharmacist, the greatest sense of achievement for me has come from sitting on the Pharmaceutical Society's working party on computers in pharmacy. It made me feel that I had something to offer to fellow pharmacists and indeed to any other small to medium sized business. Therefore I had to be allowed to set up a freelance consultancy in parallel to my managership and Sellers agreed.

I have in fact been doing this for some time with the emphasis on the "free" part. I do not intend to try and make a lot of money out of this venture but locum and travelling expenses will have to be covered.



Roger King: "I would much rather advise against computerisation than to see somebody struggling . . ."

The one big advantage I have is that I have no commercial ties with any hardware or software firm and so unlike the consultant/salesman, I am not trying to push systems. In fact I would much rather advise against computerisation than see somebody struggling to make an unsuitable system pay for itself.

It may be that I have an exaggerated opinion of my own importance and I will get no takers but at least I will have tried.

I have spent the last three years or so trying to get sponsorship for a trial computer system, details of which were originally published under the Hedon Project. I am now very close to getting this up and running although only at the pharmacy end. However, the computer companies concerned can see the logic of eventual expansion into a shared GP/pharmacy system and may extend it if it looks worthwhile. Obviously when it gets going, it will be very demanding of my time — another reason for unloading my business responsibilities.

So what else is in store in the future? I



was very pleased to be a founder member of the Rural Pharmacists Association and I am honoured to be its vice-chairman. I feel that the RPA has a very positive role to play in community pharmacy and would like to do more work on its behalf than I have been able to do so far. The enormous number of hours put in by our chairman, Mervyn Madge and our secretary, John Davies, has established the RPA as a body to be reckoned with and they deserve all the support they can get.

Even if I ended up working in a central

London pharmacy, I would still want to work for the RPA because I believe that what threatens rural pharmacy today could well affect urban pharmacy tomorrow. It is almost certain therefore that I will settle back into rural or semi-rural pharmacy within the next one to two years.

If I continue to be involved with pharmacy computing, it would be nice to buy a partnership in a pharmacy if I could find somebody able to put up with me. Who knows, I might even open a new pharmacy in Cornwall!

## Are you ostrich or kangaroo?

**In the second part of his article Roger King looks at the role of computers in community pharmacy.**

There are those in our community who still believe that if they close their eyes and bury their heads in the sand for long enough, computers will go away. However one of the lesser known sayings of Confucius is: "He who plays ostrich gets kick up backside from kangaroo playing leapfrog."

Roughly translated this means, that if we try to ignore the rapid progress of computer technology, we will do an even better job than the DHSS in reducing the status of community pharmacy. This does not mean that I think that every pharmacist should go out and buy a computer from the first cowboy he meets and to this extent I agree with David Morgan's reasoning (*C&D* Nov 26). I do not by any means agree wholeheartedly with what he says but would rather say: "Don't buy a system until you know what you want to do with it."

A conclusion I came to years ago and have published several times, is that it is impossible to run a labelling program on a small microcomputer and do anything else with it during shop hours. You can bet your life that as soon as you change discs to post invoices you will get half a dozen scripts in. This means you will have to keep them waiting ten minutes while you finish the posting, reload the labelling programme and reload the printer with labels. You might of course be brazen enough to handwrite the labels and explain that the computer was "down" at the time if you are questioned! The only way to do two jobs at once on a computer is to have true multi-user hardware — which means possibly £4,500 worth of computer.

There is another problem when it comes to pharmacy accounts which has been overlooked by most people. That is the

enormous volume of invoices to be handled each month. I stand open to correction, but I do not believe anybody has got a purchase ledger system for a micro which will handle 200 invoices a month for a single supplier. You may be able to post them individually but when it comes to ticking them off for payment, the computer has not enough memory to hold them all. Therefore some form of batching has to be undertaken which detracts from the overall effectiveness of the system.

To my way of thinking the nominal ledger is really the heart of any business and it is this that can be used to give a status report on the business at any time. Therefore it follows that for the smaller pharmacy the answer could be a good proprietary manual purchase ledger coupled to a good nominal ledger on a home computer.

The "single writing" type of purchase ledger disciplines the user into good book-keeping practices allowing both the ledger cards and day book to be updated at the

same time and the extensions into nominal headings to be made also. The nominal totals should be batched at the end of every posting and keyed into the computer. Having said this, I have still to find a commercial nominal ledger for the Commodore 64, though no doubt one will be along soon.

What I have suggested is a long way from the fully integrated accounting packages available from the larger micros, but it is also several thousand pounds cheaper! Thus it would seem that the smaller business could usefully employ a labelling system based on a home computer and without too much extramural effort also run a nominal ledger on the same hardware. That is assuming the hardware will stand up to the battering it will get in the dispensary.

I do not want to get involved in the pros and cons of the 40 plus labelling systems on the market at present. Naturally I have my own views on the subject but they are outside the scope of this article. All I would say is that before buying a system one should try to make sure that the supplier will still be going strong in twelve months time.

### A computer's place.

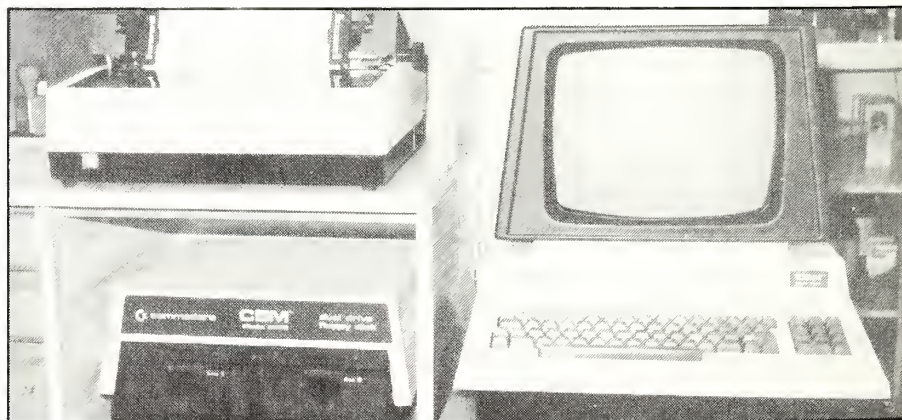
So what place does a computer have in pharmacy? The answer depends a lot on the turnover and type of pharmacy.

Firstly in a pharmacy with a turnover of up to £100,000 pa any attempt to computerise is probably a waste of time and money unless the NHS/OTC split is grossly atypical. Thus if the turnover is nearly all NHS, then a labelling system would probably be worthwhile especially if one wanted some simple form of record system.

I was once asked to establish the break even point for installation of a full POS stock control system and surprised myself by being able to justify installation for an OTC turnover of only £45,000. However, I was also the first to point out the big flaw in trying to justify a system on supposed financial savings alone. Any mathematical calculation of this type assumes that it is

*Continued on p474*

"Don't buy a system until you know what you want to do with it".





# Push off!

Line up the arrows on the cap and push off.  
That's the simple principle behind Cope Allman's unique 'Snapsafe' containers.

Bottles or vials — you won't find a more cost effective CRC on the market. Nor safer, because all Cope Allman's 'Snapsafe' containers conform to British Standard 5321 and the Pharmaceutical Societies to voluntary agreement on solid dose dispensing.

So if the competition comes round offering you anything else — feel free to quote our headline!

For technical literature about our 'Snapsafe' range of bottles and vials contact your local stockist or  
**Cope Allman Plastics Limited, Fitzherbert Rd, Farlington, Portsmouth PO6 1SD.**

**Telephone: (0705) 370102. Telex: 86512**



## **Cope Allman**

### **'Snapsafe' containers**

## **The lowest price CRC's on the market**





Continued from p472

possible to buy all OTC's in singles and therefore achieve maximum stockturn. Of course in practice this is not possible and of course it takes no account of bonus buys that dictate quantities.

I would suggest that a POS system really comes into its own with an OTC turnover approaching £100,000. With the cost of hard disc micros coming down, it has to be possible in the near future to justify a total pharmacy system in a business with a turnover of £250,000 or less.

By total system I mean a multi-user micro with a built-in hard disc capable of POS, accounting and labelling activities and also, patient medication records (PMR).

Before proceeding further on the PMR trail, I should say that in my opinion any pharmacy multiple which has no computer system should be asking itself why not?

### Patient records.

I am only too well aware that this is a highly controversial issue. Indeed there are three well established arguments against pharmacy held PMRs. One is if doctors are going to get computers it will be a pointless exercise and anyhow why should we do their job for them? Another is why should we do it unless the DHSS is going to pay for it? The third is that unless we get patient pharmacy registration, the records will be incomplete and therefore pointless.

These are all negative approaches and my answer is to refer the reader back to the opening sentences of this article.

The opposite viewpoint, which is growing in popularity, is that the PSGB Council, having established the printing of labels, will in due course direct PMRs to be held in pharmacies. Obviously Council would only be able to lay down guidelines for PMRs and there is no way in which the pharmacy dispensing only 500 prescriptions a month needs a computer to do it. However the pharmacy dispensing 3,000 a month and upwards will be hard pressed to keep records without either a computer or extra staff costs.

It is interesting to note that the proposals for a pilot study into computer-held PMRs came from Council and not from the working party. It is to be hoped that Council will be able to lay down guidelines for PMR computer systems which will at least allow them to communicate with each other and with outside sources of drug information etc. This would avoid the fiasco which has occurred with labelling systems where so many firms have seen an opportunity to make a quick killing at the expense of the community pharmacist. The computer is here to stay; let us all make the effort to make the best use of it that we can.

## Deficiency?

I was disappointed to read Xrayser's condemnation of vitamin supplementation. It's unfortunate that his propensity to pontificate should extend to an area in which it is apparent he has little knowledge. His comments are personal rather than factual, being devoid of any nutritional argument.

Firstly, the faddist attitude toward vitamin supplementation has arisen from growing public pressure due to an increased awareness and an attitude of responsibility for individual healthcare. The manufacturers are merely supplying a demand to what has become a rapidly flourishing field.

Secondly, as arbiters of public health, we do both ourselves and the public a disservice by neglecting our educational commitment towards nutrition. In abrogating our responsibility in this important area we cannot justifiably denigrate those untrained staff in healthstores for attempting to breach the gap in public service. In Australia, pharmacists have begun to realise this problem and act accordingly. Dr Robert Buist, who runs a postgraduate nutrition course, reports that pharmacists constitute 90 per cent of the 600 graduates to date. He is now seeking a similar response from British pharmacists.

The pharmacist has an active role if he/she can recognise early signs of nutrient deficiency. These present themselves with frequency in susceptible groups but are more common than is realised, especially among those whose dietary habits, or nutritional requirements, lead to an inadequate intake. The contentious issue that underlies the diagnosis (hypovitaminosis), is principally what constitutes a sign of deficiency. Clinically the medical profession defines only overt deficiency states, whereas nutritionists are more concerned with prophylaxis when symptoms of subclinical deficiency are evident. This is the crux of the matter and the area in which the pharmacist can participate.

The need for supplementation has arisen mostly from environmental pressures which present a drain, not only on our resources, but also on our bodies. Intensive farming without fallow years (for the soil to recover) the addition of fertilizers and pesticides to crops, heavy consumption of refined foods, prolonged cooking, storage and refrigeration all destroy vitamins. And this list does not include individual differences in requirement.

Like Xrayser, I appreciated Dr Li Wan Po's article, although I found it exceedingly

brief compared to the knowledge each of us should have at our command. I should also like to know why choline was omitted from the accepted eleven B complex vitamins.

**Tony Pinkus**

Secretary, Holistic Pharmacists Association.

Xrayser will probably answer for himself, but he is not the ignoramus depicted by Mr Pinkus. Nor would we like any pharmacist to believe that nutritionists are all agreed that non-dietary supplements are a necessity for other than special risk groups: they most certainly are not. Regarding Dr Li Wan Po's article, *C&D* cannot hope to take the place of the textbook or more specialist reading: we intend only to update professional training and to provide a new foundation for those who may have neglected topics for some years — Editor.

## Count the cost

So PSNC has lost the High Court case against the DHSS — are any of us *that* surprised at the result? I would think not, but what we should be thinking about is the £40,000 bill for costs that PSNC is going to pick up. This comes directly out of contractors' pockets via the levy. What on earth is the matter with our negotiators!

This seems to be a disease that pervades the echelons of power. Why are our elected leaders so intent on spending their electors' hard-earned money on frivolous ideas? We have the scandal of the logo for which large sums of money are being spent. We have unknown sums of money being spent at Lambeth which will probably never be made public: all we see is increases in fees and further harassment.

It is surely about time that costs at Lambeth were scrutinised in great depth and the surplus fat trimmed off — I am all for running a prestigious Society, but not a nationalised industry.

We must look hard at our own expenditure as if it is our own business: after all Council members have a responsibility to the electorate and cannot throw members' money away. It must be used with great care to reap maximum rewards for minimum cost.

**A. D. Allen**

London E18

More Letters on p476

NP	NO OF DAYS TREATMENT N.B. ENSURE THAT DOSE IS STATED	For use only by Pricing Bureau
R	<i>Is in Tenuate Sarfan</i> <i>mitte 30</i> <i>Seg. 7 every blue moon</i>	
Surely more than a month's supply		

Chemist & Druggist 10 March 1984



# NOR'CHEM'84

The Show that You asked for  
**THE NORTHERN  
RETAIL CHEMISTS EXHIBITION**  
Winter Gardens

**BLACKPOOL — 30 MARCH-1 APRIL 1984**  
Friday & Saturday 12 noon-9pm Sunday 10am-9pm  
**FOR PROFESSIONAL & TRADE BUYERS ONLY.**

---

**NEW PROFIT MAKERS • NEW IDEAS • SPECIAL EXHIBITION OFFERS**

Computerised Prescriptions & Labelling • Shopfitting & Displays etc, etc.

Special NORCHEM rates • Parking Space for 1,000 cars  
for rail travel & hotel • Supervised play area  
accommodation for children

---

These are some of the Exhibitors who will welcome you to **NORCHEM:**

Allergan Ltd.  
Avoca Pharmaceuticals  
Bayer (UK) Ltd.  
Beecham Group  
J. Brierley & Sons Ltd.  
Britannia Pharmaceuticals  
Cam-Era (UK) Ltd.  
Cemark Ltd.  
Chatten (UK) Ltd.  
Chemical Radio  
Chemists Associated Marketing  
Ciba Consumer Pharmaceuticals  
Colourcare International  
Concept Pharmaceuticals Ltd.  
A.P. Consul Ltd.  
Cooper Health Products Ltd.  
Coppercraft of Malton  
Cousins UK  
Cullen & Davison Ltd.  
Delta Mouldings Ltd.  
Dryden Pharmaceuticals Ltd.  
Estchem Wholesale Supplies  
Farley Health Products  
Fennell Pharmaceuticals  
Gamma Computers Systems  
Gerald Fraser Ltd.  
Gee Generics Ltd.  
Generics (UK) Ltd.  
Graysons of Nottingham  
Greenhays Sundries

John A Haleyard  
H.J. Heinz & Co Ltd.  
Ilon Laboratories (Hamilton) Ltd.  
Janssen Pharmaceuticals Ltd.  
Jovan  
Johnson & Johnson Ltd.  
Kango Hospital Products  
Kardex Systems Ltd.  
Kirby Warrick Pharmaceuticals Ltd.  
Konishiroku Ltd.  
L.E.C. Limited  
L.R.C. Products Ltd.  
Leeds Office Systems & Machines  
Lethington International Ltd.  
Lewis Woolf Griptight Ltd.  
Loewenstein & Hecht  
Lownds-Pateman Ltd.  
Luxline Limited  
Mason Nordia Limited  
May & Baker Limited  
Medo Pharmaceuticals Ltd.  
Menley & James Ltd.  
Merrell Pharmaceuticals Ltd.  
Millers (UK) Ltd.  
Millners of Manchester Ltd.  
Millroad Cosmetics & Products  
Nicholas Laboratories Ltd.  
Brian Nicols Ltd.  
Original Additions Ltd.  
Parkinson Medical

Peadouce (UK) Ltd.  
Pharmaceutical Packaging Ltd.  
Pharmacy Mutual Insurance  
Reckitt & Coleman  
John Richardson Computers  
A.H. Robins & Co. Ltd.  
Roche Products Ltd.  
David Salmon Trading Co.  
Scholl (UK) Ltd.  
Scope Lens Co. Ltd.  
Seton Group of Companies  
Seven Seas Health Care Ltd.  
Solport Ltd.  
Straits Trading Co.  
Tooth & Co. Ltd.  
Triton Shopfitting Systems Ltd.  
Vestric Limited  
Vichy (UK) Ltd.  
Wains (Distributors) Ltd.  
Warner Lambert Ltd.  
J. Waterhouse  
Wellcome Foundation Ltd.  
Weston Business Systems & Machines  
White Rose (Phar) Ltd.  
Wilkinson Sword  
Worth Photofinishers Ltd.  
Yago Holdings Ltd.  
Zachary Paul of London Ltd.

**FREE ADMISSION on REGISTRATION**  
**Spend a PROFITABLE and**  
**ENJOYABLE Weekend at NORCHEM '84**

**GRAND GALA NIGHT** Saturday 31st March  
Dine, Dance and enjoy Duncan Norville in Cabaret. Bring your Family — meet your Trade Friends. Relax in a great social atmosphere — and keep an eye on business too! Tickets £6 per person plus VAT.

Information from the Organisers:  
TRADES EXHIBITIONS LTD, Spring Street, London, W2 3RA. Tel: 01-262 2886.



More **Letters** on p474

## NI view of Dr Ford's 'vision'

I read Dr Ford's letter with interest (February 25) and a certain amount of astonishment.

I have always taken the position that when "viewing" any subject visual acuity is to be highly recommended. I understand that this can best be achieved when the "subject" is properly illuminated and, even then, the vision obtained is influenced by certain factors such as practice and motivation. Two other items are essential: a healthy "rational" retina and the ability to focus over the whole field.

It is possible that Dr Ford's tunnel vision may respond if some further light was to be applied to the area under review. Perhaps this illumination can be obtained from the published results of two surveys undertaken in Northern Ireland into the role of the pharmacist in primary health care.

Northern Ireland has a population of one and a half millions and the surveys were carried out in 1973 and 1978 with the report being published in the *Pharmaceutical Journal* on May 10, 1980. Table 10 of that report shows that in both survey years approximately two-thirds of the population sought the help and advice of their community pharmacists on matters relating to their health. The figures were as follows:

1973 Individuals	% Individuals	1978 Individuals	%
1,041,884	(100)	1,062,532	(100)
577,204	(55.4)	524,886	(49.4)
			asked for advice
121,900	(11.7)	54,189	(5.1)
			provided with medication
187,539	(18)	209,317	(19.7)
			given reassurance without medication
135,445	(13)	96,815	(9.3)
			referred to GP without medication
			told to consult their GP if the symptoms did not clear

The counter prescribing by the pharmacists was retrospectively assessed by the Department of General Practice, The Queen's University of Belfast, and in 1973 was 88.1 per cent, while in 1978, 86.3 per cent approved. The main criticisms related to the treatment of lower bowel, urinary system and blood disorders. From these findings action was taken to improve undergraduate training and community pharmacists were alerted to the problem areas.

I would suggest that the survey findings provide clear indication that pharmacists are not the "commercial moans" claimed by Dr Ford, but are very concerned to provide a first rate advisory service to the public. Looked at from any viewpoint this service to the community could only be provided from pharmacies and, by its filter effect, saves

doctors being swamped by requests for help on trivial complaints and by so doing avoids an increased drain on the public purse.

Perhaps its most valuable effect is that many thousands of the public who present suspicious symptoms are encouraged to visit their GPs and hence receive effective diagnosis and treatment.

**J. Kerr,**  
Belfast.

## In a fog

I enjoyed Dr Ford's views (*C&D* February 25, p376) of pharmacists in the "High Street". I enjoyed it not for its content but for its verbosity.

Analysis of the letter reveals a "fog index" of 19. The fog index gives a guide to how effectively one communicates. It is based on the length of sentences, total number of words, words of three or more syllables etc. An index of 9 to 12 is one of reasonable clarity. The Bible averages 6.5; a best seller 7.5; Churchill's memorandum on report writing 7.6; a government circular 23.

I was therefore surprised at Dr Ford's comments about the compliance of his patients to whom he gives both verbal and written instructions. One of Gunning's Ten Principles of Clear Writing is "write to express not to impress."

Perhaps his dispensing list consists only of government officials; more likely he has a cross-section of ordinary people — may be a pharmacist or two?

**Paul Rowbotham**  
Upton, Northampton

The index range quoted by Mr Rowbotham is lower than sometimes seen in print. The "raw" calculation gives 47 for Dr Ford's letter, but Mr Rowbotham's method multiplies this by a constant, 0.4. The message is of course unaffected! — Editor.

## God — Dr Ford?

The letter you published from Dr Steven Ford has solved a problem that has been worrying me for some time — I now know who "God" is and that he lives and works in the East Midlands!

**J.S. Colwill,**  
Hove, Sussex.

Dr Ford continued his tirade against pharmacists in last week's *General Practitioner*, and although casting doubt on the profession's commercial impartiality, does acknowledge that in a different role pharmacists could be valued members of the primary health care team — Editor.

## Oh doctor, I'm...

With the reference to Dr Steven Ford's letter it was interesting to note he doesn't share the view that pharmacists can possibly counter prescribe for minor ailments.

We, the dispensing pharmacists, know many patients who visit their doctors for minor ailments are often disappointed and told that in future, for such minor problems, they should seek the advice of their local pharmacist. Does this mean the pharmacist is being recognised as a good and competent advisor for minor ailments? GPs often are very busy and may not always have time to spot incompatibilities and drug interactions — here pharmacists are expected to interpret and evaluate.

Topical steroidal preparations, for instance, have been available OTC in the USA and Canada and no serious consequences have occurred as a result of counterprescribing.

How do doctors feel about treating patients on Saturday afternoons and on Sundays for minor ailments? Although Dr Ford says he would provide a free service if necessary, I am sure not every doctor would do this. After all they may claim through the out-of-hours service allowance.

Any "business", whether run by a grocer, chemist or even a medical practitioner, must earn money in the end. Professionals earn their bread in a different way to non-professionals.

**D. Shah**  
Clifton, Notts

## Short and...

With reference to your Comment last week: point taken!

*How to restore RPM and reduce drug bill by 5 per cent.*

1. Manufacturers to reduce prices to wholesaler by 3 per cent.
2. Wholesale margins to be reduced by 3 per cent.
3. Discounts ex wholesaler disappear (discount scale goes also).
4. NHS saves 5 per cent at a stroke.
5. PSNC devotes full-time to negotiation of fair contract.
6. Wholesaler has increased net profits for survival.

Everybody happy? (Except ABPI — but they can afford it!)

**Anthony Peel**  
Newsome, Huddersfield.

Succinct we said — succinct we got! Thank you Mr Peel: the more who follow your example the better, and we suspect many readers will be pleased too — Editor.

*Chemist & Druggist 10 March 1984*



## Poor decisions?

The PSNC has, during the past few months, behaved with either an almost incredible naivety, or a crass ineptitude that must not be allowed to pass without comment.

First, the negotiators allowed themselves to be browbeaten into accepting the iniquitous "agreement" that resulted in the front-loaded clawback.

After holding the Post-1980 Contractors Committee at arms length, the chairman found himself in the uncomfortable position of trying to justify to a conference of LPCs, convened to discuss and condemn the front-loading, why the Post-1980 Committee was able to hold up implementation of the agreement and achieve their objective, while PSNC was apparently in ignorance of the regulations enforcing FPNs. Next PSNC picked up the post-1980 contractors' discarded banner and charged headlong into ignominious defeat on the question of the legality of discounts. Why, having done so, is the Committee now considering an appeal in such a lost cause?

I do not think that any useful purpose is served in calling for the PSNC to resign and thus have fresh elections, since it is by no means certain that the superior candidates needed to revitalise it are there.

However, I do feel that the officers and members of PSNC should ponder closely future actions that are proposed, not only in regard to the "discount overpayment affair" but also the long-awaited "new contract". In the meantime, let no-one underestimate the danger of the time-bomb that is inexorably ticking away in the form of parallel imports.

**Allan D. Asher**  
London E18

At the special LPC conference last November (*C&D*, December 3, p1012) Mr Sharpe defended PSNC for not acting over the technical irregularities in applying the Drug Tariff clawback amendment. He said such irregularities have been occurring since the inception of the health service in 1948, largely to the contractors benefit. Because of delays in publishing the Drug Tariff, the time lag caused by adopting correct amendment procedures when drug prices or fees altered, for instance, would have had an adverse effect on contractors — Editor

## Vote, vote, vote!

Time is running short for Council candidates to tell the electorate what they intend to do. The time is approaching when the columns of the pharmaceutical Press fall silent and the membership decides who they wish to run pharmacy for the next three years.

*Chemist & Druggist 10 March 1984*

Let us hope that all the electorate do just that! Open your voting papers, read the manifestos and vote for seven candidates who you feel will serve you best. Let us have a record number of members voting, for that is the only way Council members will be able to represent you with strength.

Show future Council members that you are behind them 100 per cent. Come on membership, don't be apathetic: this is your chance to make your feelings heard, Vote!

**A. D. Allen**  
London E18

## No comment?

Wishing to avoid the impression of being first to rush into print, I awaited a volume of protest from others. I anticipated a roar of protest from our negotiators and a veritable furore from the protectors of our lawful interests.

I refer, of course, to the disgraceful announcement of the Secretary of State that he proposed to revert to the revolting procedure of retrospective legislation.

Is it any wonder that the PSNC gets nowhere and that the grass roots of our profession feel the Law Department to be more interested in persecution than in the administration of justice? Retrospective legislation is a term that stinks, yet it is accepted without a protest. Alan Smith just noted in a recent *PJ*, that the Department had undertaken not to claw back discount retrospectively until the promised legislation has been passed. Not a word about proposed legislation which undermines the fundamental principles of British justice.

So just what is retrospective legislation? It is a device used by unscrupulous authoritarians who wish to "get" someone who has done nothing wrong by passing legislation and "back dating" it to render illegal something which was formerly perfectly legal. This from a Government pledged to restore individual freedom.

Instead of wasting contractors' hard earned money on frivolous appeals against a system we freely entered and should have honoured until we had the new contract, PSNC would be better employed in organising a mass descent on the House of Commons. We could then exercise our right to call out our MPs in protest before we find ourselves saddled with a new contract far worse than the existing one. At present successive ministers can change their mind as to its terms and back date their actions to legalise them and bankrupt the community pharmacist.

Is the whole aspect typical of the terrible apathy with which our profession seems stricken. A 24 per cent vote at Council elections is unworthy of any profession despite what the "dismal Jimmies" tell you.

An upward surge to *at least* 60 per cent would rock the whole establishment and our negotiators to a degree that might produce miracles at Whitehall.

So come on, all you non-voters. For once prove me right that our profession is far from dead and lifeless. Be with me or revile me, I don't mind. But in the name of sanity this year rise up and vote. Don't just put your election envelopes aside unopened. Read the manifestos and decide who will best serve you faithfully — you have choice of old or new — and then please, please vote.

**Edwin Evens**  
Upminster, Essex

## Unfair shares of the cake

I am grateful for the reply from R. A. Ratchliffe (February 18, p336), to my "Little & large" letter (February 11, p290).

Unfortunately, the whole basis of his argument is erroneous since discounts by wholesalers to contractors are to be recovered in full. The discount inquiry identified the level of those discounts to large and small contractors and it is all to be reclaimed that is what the clawback fight has been about.

I based my figures on actual NHS payment sheets since these will ultimately contain the real figures.

	Shop A	Shop B
Scripts nos	1,230	5,030
Fees of 40p+ extra fees	£ 504	£2,030
On cost (15.4%)	£ 614 (2.6%)	£ 391
BPA	£ 200	£ 200
	<u>£1,318</u>	<u>£2,621</u>

I agree that our energies should be put into increasing the size of the cake but I feel it wholly justifiable to point out the existence of such an unfair situation, since most one-shop pharmacists are unable to see such comparisons and may now, like me, feel that if more cake should become available then some should be used to create a fairer system with incentive and not disincentive for business increase.

Larger contractors really should be asking the PSNC, as I am, how this situation of being paid £233 less in on cost for over four times the work ever came into being and when it will be remedial.

**Still alarmed**



# NPA certificates — a training incentive

**A big thumbs-up has been given to the inclusion of certification in the NPA training course for chemist assistants. Added incentive and a more positive attitude are comments from both assistants and pharmacist.**

The first three girls to pass the course are Amanda Hosking, Beverly Sobey and Alison Penhaligan, who received their certificates this week.

The girls all work for R. M. Williams, MPS, in Truro, Cornwall, whose business is mainly NHS. The shop has eight staff in all: one pharmacist, one dispensary assistant and two counter assistants working full-time with another pharmacist and three counter assistants part-time.

Mr Robert Williams told *C&D* that he encourages his staff to join the NPA course — the NPA already have him marked down as a training enthusiast. Even though some input is needed from Mr Williams himself in terms of supervision and discussion — he feels the value gained from the training is well worth the time it takes.

Mr Williams said he could identify the improvement in his assistants after the course: "They show more knowledge, more confidence and have a better appearance and approach to customers."

"The course is an excellent starter for new staff, and existing staff have benefited considerably — including supervisors."

The assistants are equally enthusiastic about the scheme, though all admit to feeling apprehensive before it started.

None of the girls had any previous formal training, with the exception of a Kodak sales course, which all three had

attended. In terms of background the girls are all different — Alison obtained seven "O" levels and three "A" levels and Beverly four CSEs, while such bits of paper had eluded Amanda. Yet all coped with the course equally well.

Alison and Beverly have both worked at the pharmacy for three years, while Amanda has been there nine.

Responsibilities, they say, include maintaining stock levels, keeping supplies up-to-date and ensuring the pharmacy is always neat and tidy. No-one appears to have become a "specialist". Since the course all three say they feel more assured in their jobs. "I'm now more able to serve customers with confidence," says Alison.

The course has made the girls hungry for further training, despite the fact that some work had to be done at home as well as in the periods put aside at the shop.

The girls' suggestions for improving the course include recommendations for a more practical emphasis, with particular reference to first aid and window displays.

"A section on oxygen, its uses, and the cylinders would also be helpful," says Beverly — a remark supported by Mr Williams and perhaps reflecting the pharmacy's NHS strength. The proprietor also felt vacuum ware, colostomy and computers could have been profitably included. Vacuum ware is in fact incorporated in the latest sundries section of the course.

Beverly thought there was insufficient emphasis on "referring customers with small children to the pharmacist". And she found the section on electricals to be the hardest



Alison Penhaligan receives her NPA training certificate from Dr David Maddock, FPS, NPA board member for Cornwall and Vice-president of the Pharmaceutical Society.

because very few such products are stocked in the shop.

The NPA scheme is run as a correspondence course. Product knowledge, shop procedure, customer relations and merchandising skills are all put to the test. Entrants face over 20 questionnaires on subjects ranging from nappy rash treatment to dealing with prescriptions and answering the telephone.

To give some idea of the areas covered, examples of questions included are: "What should a sales assistant do with customers who make regular purchases of products such as laxatives, pain killers and cough and cold medications?", "Which suntan products would you recommend for very sensitive skin, dry skin, greasy skin?", "How would you deal with the customer who knows everything?"

The course is priced at £47.50 for NPA members. This includes one complete set of task sheets, the marking of them and a certificate if the student passes. A 12-month up-date of subjects covered is also included. For every extra set of task sheets the cost falls to £10. Certification is proving to be popular, with over 30 courses already sold since January. "There has been a tremendous increase over the past couple of years," says the NPA training officer, Ailsa Benson.

Mr Williams is certainly pleased with the idea of certificates, and will allow the girls to display them in the pharmacy — an action he says is "very necessary in today's trading".

The certificate wording is as follows: — "Training Course Certificate of Completion (Name) has completed a course of training undertaken in the establishment below, based on the NPA Staff Training Course and has submitted a completed work book for our examination. An outline of the training programme undertaken is listed overleaf."

The final word goes to Mrs Benson, however: "As a customer I recognise the need for more staff training in retail outlets — and that includes pharmacies. The new certificates should provide a tangible reward for the effort involved and a real incentive: we hope they will lead to training really taking off in 1984."



Pictured at the Corner House chemist in Truro, Cornwall are, from left to right, Alison Penhaligan, Mr Robert Williams, MPS, Dr David Maddock, FPS, assistant secretary National Pharmaceutical Association, Mr Evan Downing, FPS, Amanda Hoskins, and Samantha Slater who is currently undertaking the training course.



# Sunday trade: small shops will suffer

**The majority of retailers are strongly in favour of maintaining control of trading hours on Sundays, the Retail Consortium says in its evidence to the committee of inquiry into proposals to amend the Shops Act.**

"A widespread removal of restrictions on opening, particularly on Sundays, can only increase the considerable pressures on the viability of many shops," the report says. The effect of such action on the number of shops that survive, the level of employment sustained by the trade and the location of shopping facilities, would be considerable.

The report notes that the additional costs of staff, heating, lighting, insurance and cleaning all affect smaller businesses disproportionately and would lead to a decline in their numbers. In any case many shop owners and shop workers want to enjoy a "traditional Sunday."

Controls on Sunday trading could be maintained by a restriction on hours, by a

restriction on goods sold, or by a restriction on the size of stores allowed to trade," the report says.

The Retail Consortium says there is general agreement in the trade that the Shops Act is archaic, out of line with current commercial practice and in need of reform. "What is certain is that any new legislation should be clear, simple to interpret and easily enforceable."

It says there is strong support for the removal of the section of the Act relating to early closing, although the Co-operative Union disagrees. The vast majority want some control retained of general closing hours. Opening from 8am to 9pm is favoured by most, with the exception of newsagents and bankers.

The report concludes: "The advantages claimed for additional trading hours must be weighed carefully against the real social and economic issues that such changes could involve."

## UK housewife 'a nut in the loo'

**"Basically, the UK housewife is a nut," says Patrick Rykens, marketing director of Reckitt household and toiletries division. "She is neurotic about hygiene in the loo."**

Nevertheless, the company has increased Harpic profits from £2.5m to £14m in the five years from 1978 with a claimed brand awareness of 99 per cent.

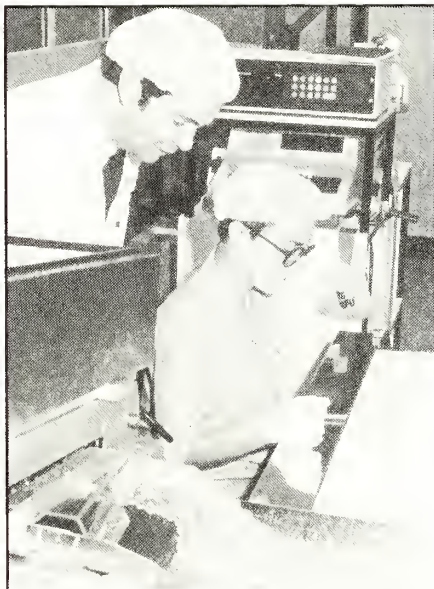
"Our research has suggested that housewives use these products not as serious cleaners, but as a sign to family and guests that they care about hygiene in the home. Add to these needs a clear conscience, sense of satisfaction, and you have the reasons why every home in the land has an average of 2.5 lavatory cleaning products. In fact, lavatories generally are so clean, that we have to introduce germs into our own laboratory loos in Hull, before testing new products."

Mr Rykens attributes Reckitt's success in recent years to their strong brand portfolio — including also Haze, Disprin, Supersoft, and Steradent — together with their willingness to risk the launching of new brands.

A new Haze airfreshener, Pomander, described by Patrick Rykens as "a

revolutionary product — the best in the world" will be launched next week.

Mr Rykens was speaking to a KAE business development conference on the theme "What really works in practice."



R P Scherer's plant at Blagrove near Swindon recently received a visit from local MP Simon Coombs. Mr Coombs, a Tory "new boy" in Parliament, plans a series of such fact-finding visits in the constituency over the coming year.

## Fisons profits up by half

**Fisons increased pre-tax profits by £10.1m to a record £31.2m in 1983. Pharmaceuticals were again the star performer, with a contribution of £25m at the trading level.**

Drug sales were £31.8m better at £158.2m. Total turnover for the group was £365.4m — a £14.9m increase.

Chief executive John Kerridge credits the pharmaceutical division with "sustained progress among both new and existing products". Looking to the future, he says: "the bulk of our research and development spending, and the whole of our priority, is on developing the next generation of anti-allergy products".

Among other divisions, scientific equipment sales rose £16m to £101m, contributing £5.7m (£4.8m) to trading profits. Last April's £27.7m rights issue and the recent sales of FBC Holdings allowed the group to end 1983 with no net borrowings and a strong balance sheet.

## Giants merge animal care

**ICI and Wellcome are to merge their two international animal health-care operations.**

The new organisation, to be known as Coopers Animal Health, will be headed by a UK-based company which will co-ordinate international development. This company, the largest in the planned group, will be owned 51 per cent by Wellcome and 49 per cent by ICI.

Other companies in Australia and New Zealand will be controlled by ICI. Merger re-organisation should be completed by the Autumn.

Coopers' UK operation will be centred on Berkhamsted, and led by Wellcome's Dr R.M. Cresswell as chief executive.

## Unichem shift

**Unichem's Nuneaton branch is soon to move to custom-built premises at Hinkley in Leicestershire.**

The new building, five miles from the current site, offers 60,000 sq ft of office and warehouse space — three times more than the existing branch. More than 200 staff will work there under general manager Duncan Smeaton. The branch should be finished by the end of this month, for transfer in April.



## Drug exports top £1 billion

Pharmaceutical exports from the UK in 1983 exceeded £1bn for the first time, rising by nearly 10 per cent on 1982 figures to total £1.074m (£978m), says the Association of the British Pharmaceutical Industry.

Imports rose by nearly 26 per cent to £470.1m (£374.6m), making the positive trade surplus at £604.1m only marginally ahead of the 1982 surplus (£603.4m).

A substantial proportion of the increase in imports was due to the effects of parallel imports from, in particular, Belgium, France and Italy, where restrictive price control schemes create significant price differences.

The industry now ranks in the top four manufacturing industries providing a trade surplus for the British economy. In international terms only the US and Switzerland have a positive trade balance in pharmaceuticals that surpasses the UK's.

For the first time the US became our biggest single export market with purchases

of £90m. Imports from the US totalled £53.4m, giving a balance of trade surplus of £36.6m with the world's largest indigenous pharmaceutical industry.

## Farley buy 'Nylax' firm

**Farley Health Products have bought British Chemotheutic Products, best known for their Nylax tablet laxative.**

Farley's production director Barry Meacham takes additional responsibility as BCP chairman, while the company's Michael Logan becomes general manager.

BCP currently employ 54 staff on a 35,000 sq ft site half a mile from Bradford city centre. "Our immediate objective is to continue running BCP as an independent operation, while giving them the best opportunity to expand sales," says Barry Meacham.

"Our initial impression is of an economically-run plant, with good standards of manufacturing and quality."

## 3M on the move

**3M's healthcare division is moving from Bracknell, Berks, to Loughborough in Leicestershire.**

Medical, community care, dental and animal care groups will shift this Summer, with surgical and orthopaedic functions following about a year later.

The new location will be the Morley Street headquarters of 3M subsidiary Riker Laboratories, currently being extended to accommodate the extra staff.

Riker managing director George Meredith says the relocation will bring the advantage of closer co-ordination between all 3M's different health care concerns.

**Vinaflex have bought the Comfitts** footwear range from Delta Mouldings. Bill Williams, previously managing director of Delta Mouldings joins the board of Vinaflex, who are based at Wanlip Road, Syston, Leicester.

**The number of UK retail stores** operating scanning checkouts doubled last year to 82 says ANA.



## Aren't you selling a Devil of a range from Dendron?

When we launched Stain Devils last year, we knew they'd be successful. But we didn't know just how successful!

Sales for the first month were exceptional. And they've been growing ever since.



Now, with new StainSalts joining the range, even more housewives will be seeing the Stain Devils advertising. So you simply can't afford not to stock Dendron's devilish range.

**You can depend on DENDRON.**

Dendron Ltd., 94 Rickmansworth Road, Watford, Herts WD1 7JJ Tel: (0923) 29251.



## Renewed hope for sustained recovery

**Confidence that Britain's economic recovery will not run out of steam this year is confirmed in evidence from recent Government statistics.**

The latest rise in the output of goods and services to its highest level for four years is generally regarded as consistent with the Government's expectation of 3 per cent growth in the economy during the year. And the Central Statistical Office's latest indicators, which have a good track record for predicting turning points in the economic cycle, add strength to a broadly optimistic consensus.

Despite some uncertainty over the reliability of the recently introduced CBI/FT survey of the distributive trades, the latest results point to a continuation of the consumer spending boom. For February, some 70 per cent of retailers expect an improvement, compared with 67 per cent in January and 64 per cent in December.

High Street figures confirm that the total value of sales last year was 9.6 per cent higher than in 1982, while sales by mixed retail businesses increased by 5½ per cent. The final seasonally adjusted index of retail sales was 119.5 (1978=100) — a marked increase on the level of recent months.

### Chemists' sales up.

Chemists improved the value of their sales by a massive 51 per cent between November and December, to reach a level of 8 per cent higher than in December 1982. In the final quarter of 1983, sales were 9.9 per cent higher than in the corresponding period of 1982.

The number of retail chemists rose in 1982 for the second year running. A recent report from market analysts Keynote interprets this as a response to the fierce competition in pharmaceuticals from supermarket chains, department stores and discount drug stores.

The fall in the monthly all-items retail price index in January — for only the third time in 14 years — now makes the Government's prediction of 4.5 per cent inflation by the end of the year seem more attainable than many pundits had featured.

The decline in medicine and toiletry price rises was reversed in January to reach a 4.2 per cent annual rate. The year-on-

year rate of increase had been inching down since May to reach 2.7 per cent in December.

Prices of raw materials and fuels used by manufacturing industry rose just over 1 per cent between December and January, but the increase in the index over a 12-month period was left little changed, at 7.3 per cent. Lower raw material costs for the chemical industry in 1983 helped to improve profit margins.

The rise in industry's selling prices in the year to January was 5.7 per cent, against 5.6 per cent in December. The producer price indices for pharmaceutical products and toilet preparations moved up in January to give annual percentage rises of 3.2 and 3.0 respectively, while photographic materials and chemicals continued to show around 9 per cent year-on-year increases.

### Growth in production.

Meanwhile, on the production front, the pharmaceuticals sector of the chemical industry showed significant growth during the first half of 1983. And the production index for perfumes, cosmetics and toilet preparations for the fourth quarter of 1983 shows a substantial 11 per cent increase, compared with the same period in 1982. However, the corresponding figure for pharmaceutical products indicates a fall of 2.5 per cent between the third and fourth quarters last year, and a year-on-year increase of only 3.9 per cent.

The values of manufacturers' sales of pharmaceutical products, and of perfumes, cosmetics and toilet preparations each rose by just over 12 per cent between the third quarter of 1982 and the same period last year.

More encouraging news came recently from the Chemical Industries Association announcing a 14 per cent jump in capital spending by Britain's chemical industry during the first nine months of last year.

*Continued overleaf*

## Business Statistics

### Prices and costs

Prices and costs	Latest data		Previous data		% change on year
<b>Retail prices</b> (January 1974=100):					
all items	Jan	342.6	Dec	342.8	5.1
medicines, surgical goods, toiletries	Jan	350.5	Dec	374.5	4.2
<b>Producer prices</b> (1980=100):					
manufacturing industry	Jan	128.1	Dec	127.3	5.7
chemical industry	Jan	122.9	Dec	121.8	5.9
pharmaceutical products	Jan	127.5	Dec	126.8	3.2
toilet preparations for men	Jan	130.0	Dec	129.2	2.2
other toilet preparations	Jan	125.9	Dec	125.8	3.0
surgical dressings	Jan	133.1	Dec	132.6	5.1
photographic materials and chemicals	Jan	121.1	Dec	120.6	8.9
<b>Average earnings*</b> (January 1980=100):					
distribution and repairs	Nov	144.9	Oct	143.4	6.0
chemicals and man-made fibres	Nov	164.7	Oct	153.1	10.2

### Output

<b>Manufacturers' sales*</b> (current prices) £ thous:					
pharmaceutical preparations	3rd qtr	495,047	2nd qtr	514,030	
pharmaceutical foods and food additives	3rd qtr	7,291	2nd qtr	7,427	12.8
pharmaceutical chemicals	3rd qtr	91,545	2nd qtr	83,969	
perfumes, cosmetics and toilet preparations	3rd qtr	248,900	2nd qtr	212,000	12.2
<b>Exports*</b> (current prices) £ thous:					
pharmaceutical chemicals and preparations	3rd qtr	247,732	2nd qtr	261,950	16.4
perfumes, cosmetics and toilet preparations	3rd qtr	62,226	2nd qtr	60,818	20.1
<b>Imports*</b> (current prices) £ thous:					
pharmaceutical chemicals and preparations	3rd qtr	118,604	2nd qtr	106,989	19.8
perfumes, cosmetics and toilet preparations	3rd qtr	35,126	2nd qtr	32,834	27.4

### Sales

<b>Consumers' expenditure</b> (1980 prices) £ bn	4th qtr	36.8	3rd qtr	36.4	3.2
<b>Retail sales*</b> (value) per week (1978=100):					
all retail businesses	Dec	239	Nov	189	11
chemists	Dec	249	Nov	165	8

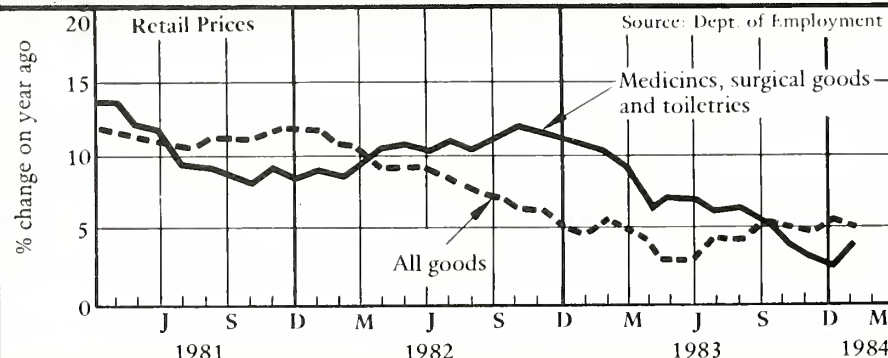
### Business conditions indicators

<b>Average earnings index</b> (1980=100)	Dec	153.1	Nov	152.1	7.8
<b>Capital expenditure</b> (1980 prices) £ m:					
distribution	4th qtr	1,024	3rd qtr	971	17.6
<b>Stock changes</b> (1980 prices) £ m:					
wholesaling	4th qtr	14	3rd qtr	-233	—
retailing	4th qtr	46	3rd qtr	74	—
<b>Unemployment</b> (UK) per cent	Dec	12.9	Nov	12.9	-0.6
<b>Live Births</b> (England, Wales and Scotland)	Nov	51,064 (4 wks)	Oct	54,693 (4 wks)	-2.3

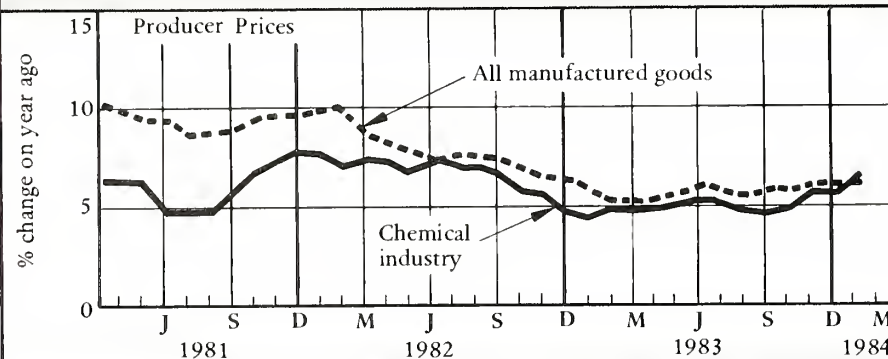
Sources: Central Statistical Office, Department of Employment, Department of Trade and Industry, HM Customs & Excise, OPCS. All figures seasonally adjusted except where marked \*



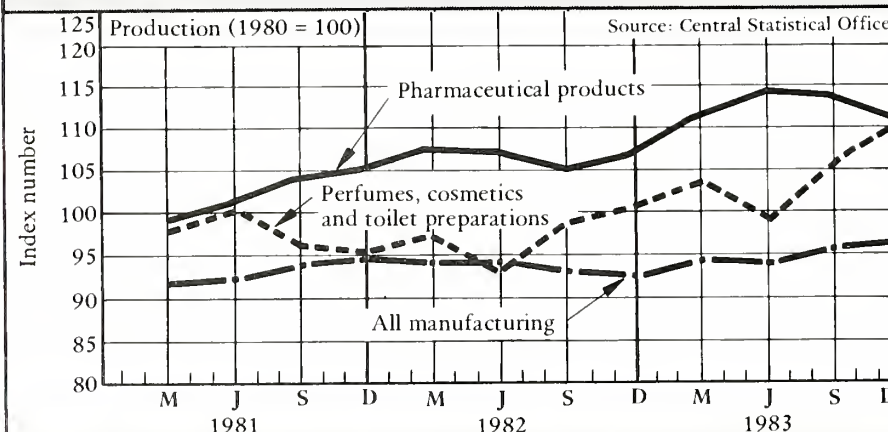
### Medicines and toiletries retail prices move ahead



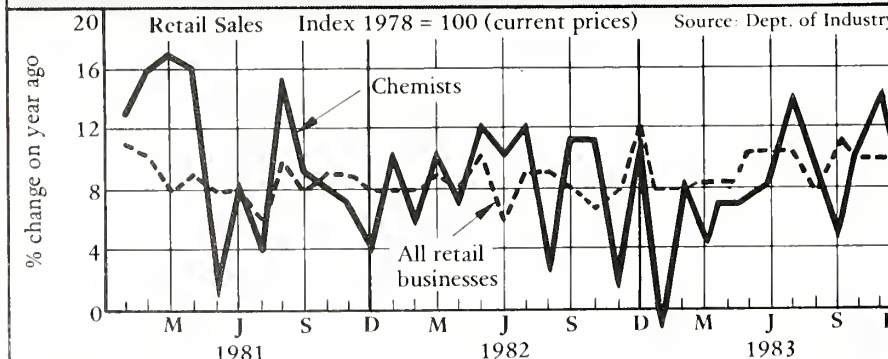
### Chemical industry's prices edge higher



### Toiletries output continues upwards



### Retail chemists' sales fall back in December



Sunday, March 11

**Beauty & Health International '84**, Grand Hotel, King Edwards Parade, Eastbourne, 9.30am-5.30pm. Until March 12. Trade show for health and beauty therapists with the latest in treatment, preparations and techniques. Information from: Shelagh Dixon tel 01 643 8040, ext 4234

Monday, March 12

**North Metropolitan Branch, National Pharmaceutical Association**, Postgraduate centre, Chase Farm Hospital, Enfield, at 8pm. Mr E J Downing, assistant secretary to NPA, on "Profit from your accounts"

**Southampton Branch, Pharmaceutical Society**, Boldwood Suite, Southampton University. Southampton 1984 Conference preview and annual meeting

**Swindon Branch, Pharmaceutical Society**, King's Arms Hotel, Wood Street, Swindon, at 8pm. Visit of vice-president — Dr Maddock

**Weald of Kent Branch, Pharmaceutical Society**, Kent & Sussex Hospital, Postgraduate centre, Tunbridge Wells, at 8pm. Miss Rowe on "Special diets, lecture 2"

Tuesday, March 13

**Lanarkshire Branch, Pharmaceutical Society**, Strathaven Suite, Garnon Hotel, Motherwell, at 8pm. Guest speaker Dr J Chilton, resident secretary, Scottish Department

**Leicestershire Branch, Pharmaceutical Society**, Postgraduate medical centre, Royal Infirmary, Leicester, at 8pm. Felicity Lee on "Alternative medicine"

**South West Metropolitan Branch, Pharmaceutical Society**, Lecture Theatre, St George's Hospital medical school, at 7.45 pm. Mrs J Mostyn, regional administrator, Family Planning Association, on "Family planning"

Wednesday, March 14

**Epsom Branch, Pharmaceutical Society**, Bradbury postgraduate medical centre, Epsom District Hospital (2nd floor), at 7.45 pm. Mrs Joanne Gray, regional consultant in communication skills, on "Communicating with the patient"

**Stirling and Central Scottish Branch**, Carron Suite, Park Hotel, Falkirk, at 8pm. Mr B D. Fangreave, senior hospital medical officer, on "Road traffic accidents and first aid"

**Dundee and Eastern Scottish Branch, Pharmaceutical Society**, Pharmacy department, Ninewells Hospital and medical school, Dundee, at 7.30pm. Talk by Mr Alan Davidson, assistant secretary, Law Department

Thursday, March 15

**Bristol Branches, Pharmaceutical Society and National Pharmaceutical Association**, Southmead Hospital centre for medical education, at 7.30 pm. Mr Tim Astill, NPA director on "Troubled times"

**Dorset Branch, Pharmaceutical Society**, Postgraduate medical centre, Poole General Hospital, at 7.30 pm. Mr J. Myers on "Surgical dressings and their effect on wound healing". Buffet and exhibition of dressings

**File and Edinburgh Branches, Pharmaceutical Society**, City Hotel, Dunfermline, at 7.45pm. Professor D G Wiberly, Dept of Science, Salford College of Technology, on "Drug innovation and social policy"

**Hull Pharmacists' Association, Postgraduate Centre**, Hull Royal Infirmary, at 7.45pm. Graham Hartley, Scotch Whisky Association, on "The making of scotch whisky"

**Mid Glamorgan Branch, National Pharmaceutical Association**, Duffryn Firwd Hotel, Caerphilly Road, Nantgarw Mid-Glamorgan, at 8pm. Annual meeting

**United Kingdom Clinical Pharmacy Association**, Belfast Workshop on drug literature evaluation. Details from M. N Morrow, Dundonald House, Upper Newtownards Road, Belfast

Saturday, March 17

**Atro Hair & Beauty '84**, Bloomsbury Crest Hotel, Coram Street, London WC1. Second annual black hair care, cosmetic trade and consumer exhibition. Free entry to trade buyers. Until March 18. Details from Jane Hammond, Trident PR, tel 01-876 3209

Sunday, March 18

**South East England Region, Pharmaceutical Society**, Regional conference on "Pain and terminal care" to be held at Brighton. Information from Dr Geoffrey Harlow, tel 0273 693655, ext 2118

Advance information

**Macarthy's pharmacy fair**, Barbican Centre, London, on March 25. Seventy-seven manufacturers exhibiting with special promotional prices for those attending. Independent customers from eight depots have been invited. Star prize is a trip for two to see the Taj Mahal and Himalayas



## CLASSIFIED

**Post to**  
Classified Advertisements,  
Chemist & Druggist,  
Benn Publications,  
Sovereign Way, Tonbridge,  
Kent TN9 1RW  
Telephone Tonbridge (0732)  
364422. Telex 95132  
**Ring Russell Peacock ext**  
**272 for further information**

**Publication date**  
Every Saturday  
**Headings**  
All advertisements appear under  
appropriate headings.  
**Copy date** 4pm Tuesday prior  
to publication date.  
**Cancellation deadline**  
5pm Monday prior to  
publication date

**Display / Semi Display**  
£11.50 per single column  
centimetre, min 30mm. Column  
width 42mm.  
**Whole Page** £990.00  
(260mm x 180mm)  
**Half Page** £525.00  
(125mm x 180mm)  
**Quarter Page** £295.00  
(125mm x 88mm)

**Box Numbers** £2.50 extra  
**Series Discounts**  
5% on 3 insertions or over.  
10% on 7 insertions or over.  
15% on 13 insertions or over

### Professional Prescription Computer Labelling



## This is Quality Labelling

The Richardson system is more than just a labeller.

Apart from labelling, countless other business applications are possible using the versatile and well-proven BBC Model B Microcomputer. Because of its widespread use in schools and businesses worldwide, there is an enormous range of software to choose from, which,

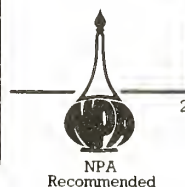
depending on choice, can do your wages, VAT and accounts, for example, or even play games!

Although quality labelling is the first priority, why not buy a system that will do other things too? At prices from £1,165, the Richardson system has the capability of doing so much more – can you afford to settle for anything less?



SEE US AT

**CHEM'84**  
Winter Gardens - Blackpool  
30 March - 1 April 1984



23

John Richardson Computers Ltd., Unit 337, Walton Summit, Bamber Bridge, Preston, Lancashire PR5 8AR. Tel: (0772) 323763

### Shopfitting

#### EFFECTIVE DISPLAY STIMULATES DEMAND



- Our SUPERSERVICE modular shopfitting system is designed to give total display and thereby generate maximum demand and profit
- Effective displays are provided by the wide and flexible range of "SUPERSERVICE" accessories the latest addition to which is our FOUR STEP BASE SHELF SALES BOOSTER only available with "SUPERSERVICE"
- Our "PLAN FOR PROFIT" includes a survey of your shop and merchandise from which we prepare a detailed plan, a merchandising profile and realistic quotation for you to study before taking action
- If you would like to invest in our "PLAN FOR PROFIT" please contact us so that we can appoint a planning consultant to call on you

**CRAMS** 290 Huntingdon St. Nottm.  
Tel: (0602) 507799



WHERE VALUE  
FOR MONEY  
STILL MATTERS

### CHEMIST & DRUGGIST CLASSIFIEDS GET RESULTS

#### Contract Packing

#### Meet Fleet. The experts in manufacture & assembly of pharmaceuticals & toiletries.

To find out more about our full range of contract packing, manufacturing and product development services, send today for the Fleet brochure.

Fleet Ltd., 94 Rickmansworth Rd., Watford, Herts WD1 7JJ. Tel: (0923) 29251

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Position \_\_\_\_\_  
Address \_\_\_\_\_

**Fleet**

Large enough to cope,  
small enough to care.

TOILETRIES, COSMETICS, PHARMACEUTICALS, MEDICINES



## Appointments

### Pharmaceutical Product Development East Midlands

CARE LABORATORIES LIMITED is a subsidiary of ICI PHARMACEUTICALS DIVISION and is responsible for the development of pharmacy and retail pharmaceutical products. A new development initiative will provide significant expansion for the Company in the future on top of an already successful product range which includes the 'SAVLON' products. There is an immediate need to fill two challenging appointments.



#### NEW PRODUCT DEVELOPMENT (Salary negotiable plus company car)

This is an Executive position requiring an ability both to influence development directions and to carry assigned projects aimed at the pharmacy sector through from concept to launch. Candidates, ideally aged 25-35, should have at least 2 years knowledge of the pharmacy sector. Evidence of some marketing achievements would be an asset but marketing should not be the sole background. A relevant technical qualification would be a useful addition.

#### PHARMACEUTICAL PRODUCT FORMULATION (Salary negotiable)

A Product Formulator is required to join the team who would ideally be a Pharmacist with at least 3 years experience in pharmacy/retail medicines formulation work, with a keen interest in their marketing and capable of contributing to the creation of new product opportunities.

For an application form please write to:

Mrs. P. Tubb  
Care Laboratories Ltd.  
Wimsey Way  
Somercotes, Derbyshire, DE55 4PT

## Agents

### ZACHARY PAUL of LONDON

Require

**EXPERIENCED EXECUTIVE REPRESENTATIVES/AGENTS**

Calling on the Chemist and Beauty Salon trade. To carry ZP Ranges of Fashion Jewellery.

Car, expenses, salary, commission.

Apply Mr Stewart, 01-640 8162

89A London Road, Morden, Surrey.

Full CV in Strictest confidence

### AGENTS REQUIRED

throughout the UK to sell a range of cosmetics for darker skins.

Excellent commission offered.

Write with full details to: —

**Chezahm Ltd,  
207 Victoria Street,  
London SW1 5NE.**

### SALES AGENTS

Required by expanding and well established Pharmaceutical Company, Distributors of Ethicals, Generics and Sundry items to the retail and wholesale chemist trade in U.K. and Overseas.

A unique opportunity for Sales persons with good connections and experience to assist the existing sales force with expansion programmes.

Vacancies in most parts of the UK. Good commission and full promotional support given.

Apply in confidence to  
The Managing Director  
BOX C&D 3041.

### AGENTS REQUIRED

to sell Henna products in Scotland, Ireland, SE England & overseas.

Please contact:

**Persian Henna Ltd, Unit 12, Lammas Close,  
London E10. Tel: 01-539 6506**



## Appointments

### REPRESENTATIVES

We manufacture an internal and external beauty programme absolutely unique in the world. Looking for representatives in the UK, having good connections with pharmacies, working on a commission basis which would be very interesting.

**SALES PROMOTION ENTERPRISE**  
PO BOX 113  
3027 BERNE  
SWITZERLAND  
Tel: (01041 31) 564087  
Telex: 911145 — Attention Mr. Frumkin.

## Shopfitting



### SHOPFITTING SERVICE

**N.P.A. & NUMARK APPROVED**

FREE PLANNING AND ADVICE. FOR YOUR SHOPFITTING PROJECT.

Contact: —  
LUXLINE,  
8 COMMERCE WAY, LEIGHTON BUZZARD, BEDS.  
Tel: 0525 381356.

## Kingston & Esher Health Authority

### Pharmacy Technician Kingston Hospital

Hours — 37 per week.  
Salary £4283-£5604 plus London Weighting.

If you hold a Certificate of the Society of Apothecaries or the City & Guilds of London Institute Dispensing Technicians Certificate, you are invited to apply for a post based in this busy, friendly Pharmaceutical Department and working on rotation to the Royal Eye Unit (ophthalmic) and Long Grove Hospital (psychiatric) Epsom. Duties are primarily dispensing for in-patients, out-patients and day patients but also includes visiting the wards to supply stock medicines. The department is currently being up-graded to provide a new sterile dispensing suite which will be operational later in the year.

Further information available from Pauline McCalla, Staff Pharmacist, telephone 01-546 7711 ext 314.

Job description and application form available from **Personnel Department, Kingston Hospital, Galsworthy Road, Kingston-upon-Thames, Surrey.**  
Tel: 01-546 7711 ext 571.

Closing date 23rd March, 1984

## Agents

### AGENT

Required for Scotland

With connections to department stores, chemists, gift shops etc.

For distribution of high quality ranges of well established merchandise.

**BOX C&D 3042**

## Shopfitting



### STORE FITTINGS LIMITED

For the **ULTIMATE** in pharmacy design with emphasis given to individual requirements.

Telephone: 0626 832059  
Northern Sales:  
Carlisle 0228 47149  
Allplan House, Cavalier Road, Heathfield, Newton Abbot, Devon TQ12 6TG

## Stock for Sale

### ATTENTION!

CHEMISTS — DRUGSTORES NOW OPEN.  
LONDONS NEWEST PERFUME WHOLESALERS.  
LARGE SELECTION.

**JUST PERFUMES**  
457B ALEXANDRA AVENUE,  
RAYNERS LANE, HARROW,  
MIDDLESEX.

Tel: 01-866 4563 and  
01-868 0100

CALLERS WELCOME.

### ALAMI IMPORTS & EXPORT LTD

Handkerchiefs loose and boxed, range of tea towels. Jacquard and handloom towels, pillow cases, yellow dusters, face cloths, baby nappies, terry socks.

REAL FIBRE BULK INQUIRIES WELCOME

**HOPEGLADE HOUSE**  
19, 23 KINGSLAND ROAD  
LONDON E2 8AA

Tel: 01-729 5501 (4 lines)

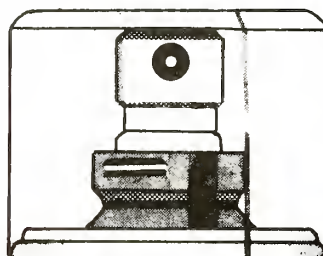
Cables: SUNAMEX LONDON, Telex: 893903 ALAMI G

### ONE-SIZE TIGHTS

from £2.75 doz. plus VAT. Childs Ribbed tights from £4.66 doz. Tax Free. Min. order 10 doz. overall. CWO. Carriage free. Full price list with other lines.

### E & R KAYE,

16/18 New Bridge Street,  
London EC4.  
Est. 40 years



### GERALD FRASER

WHOLESALE COSMETICS

**IF YOU WANT FRENCH PERFUME ENGLISH PERFUME DISCOUNT PRICES DISCOUNT COSMETICS**

Give us a call at:  
33 Broughton Street,  
Manchester  
Telephone:  
061-832 3427

Open 9.30-5 weekdays;  
10-2 Sundays

## Trade Services

Tablet Production,  
Liquid Production,  
Powder Production,  
Packing



**CONTRACT PHARMACEUTICAL SERVICES LIMITED**  
Park Road, Overseal, Burton-on-Trent, Staffordshire  
Telephone: 0283 221616. Telex 341345

## LEXDRUM

0626 832308

WE OFFER A PROFESSIONAL SHOPFITTING SERVICE FOR THE RETAIL PHARMACY

LEXDRUM STOREFITTERS  
Chapple Rd, Bovey Tracey, Devon.  
0626 832308



## Racing to the pharmacy

**"If I don't frighten myself a little bit I'm not going fast enough" – that's the philosophy of Jeff Gresswell, MPS, a former Brands Hatch racing instructor.**

Jeff first raced when he was 24 but gave up when he was 30 to train as a pharmacist. But the lure of the track has proved too much and he is now poised to make a comeback this month at Mallory Park.

"Racing's been in my blood since I was 11. I can't just give it up," he told *C&D*.

"It's an expensive hobby though. When I gave up in 1978 my debts just about equalled the value of the car. And this season I expect the racing bills to reach £4,000."

At the moment Jeff is looking for a sponsor and hoping that it may be someone from the pharmaceutical industry.

"After all racing is my hobby and will be strictly on the sidelines. Pharmacy is my career," he says.

He works for Foster & Plumpton, a Hull-based firm of chemists, but continues to spend his spare time working on his Merlyn 24FF1600 racing car.

## Unichem helps Jim to fix it

**When the BBC received a letter asking if Jim could fix it for a 60-year old grandmother to play in a marching band, Unichem's payroll manager was enlisted to help.**

Aside from his duties at Unichem, David King also commands the Surbiton Royal British Legion youth marching band. He has been officer of the band for 18 years – and so was the natural choice when the BBC contacted the Legion for help.

Molly Goode's life ambition had been to play the cymbals in a marching band, and when her granddaughter wrote to Jimmy Saville her dream was fulfilled.

"She had a smashing time and played the cymbals extremely well," David told *C&D*. He also presented his "pupil" with the Jim'll Fix It medallion.

□ The finals of the eighth pharmacist golfer of the year tournament is to be played at Gullane Golf Club, East Lothian, Scotland, on September 12. It is organised jointly by Unichem and Colgate-Palmolive



**Beatson Clark plc:** Adrian Lambert is appointed commercial manager at the company's Rotherham plant. He was previously cold end manager at Beatson's Stairfoot facility. His successor there is Alan Rhodes, who joined the company from the steel industry.

**Chemist Brokers:** Hamish Gibson is appointed sales director. He originally joined parent company Food Brokers as a salesman, subsequently being promoted to grocery district manager and marketing manager. Andrew Spraggs becomes Southern regional manager in the sales division.

**Cooper Health Products Ltd:** Mr Christopher Stean is appointed national field sales manager (chemist trade). Previously he was Southern sales manager with Proctor & Gamble.

**Nordisk-UK:** Mike Salter becomes clinical research manager, John Hughes is appointed information manager and Tony Cox marketing services manager.

**Robinsons of Chesterfield:** Mr Ben Robinson joins the company as group marketing manager, baby products. Ben, who joined the company in 1980, was responsible for the launch of Soft & Pure cotton wool.



**Boots prizewinners** – Mr Keith Ackroyd, managing director of Boots retail stores, presented the Boots Company Prize for Pharmacy to the 17 prizewinners from the UK schools of pharmacy on February 20. The winners were invited to the company's Nottingham headquarters for the day, and given a tour of the head office and the tablet manufacturing plant. Those present were: Miss J. Berry (Leicester), Miss J. Brommell (Manchester), Miss K. Ebbitt (Aston), Mr J. Evans (Portsmouth), Miss J. Halliday (Heriot-Watt), Mr B. Katechia (Liverpool), Miss J. Keeble (Nottingham), Miss W. Lawson (Strathclyde), Miss D. Lewis (Bradford), Miss A. Loftus (Belfast), Mr W. Lok (Chelsea), Mr B. Mistry (Brighton), Mr A. Patel (London), Mr J. Patel (Sunderland), Mr H. Paw (Cardiff), Mr A. Smith (Bath), and Mr D. Walker (Aberdeen). Also pictured are Mr A. K. Fox, pharmacy superintendent, and Mr S. J. Churton, graduate recruitment manager.

Typesetting and graphics by Magnet Ltd, Sidcup, Kent. Printed by Riverside Press Ltd, Whitstable, Kent. Published by BENN PUBLICATIONS LTD, Sovereign Way, Tonbridge, Kent TN9 1RW. Registered at the Post Office as a Newspaper 31/25/16s. Contents © Benn Publications Ltd 1984. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, mechanical, photocopying, recording or otherwise without the prior permission of Benn Publications.



# Paracetamol

Blister packed or bulk.  
Own label if required.

Competitive price, unbeatable service



For prices and samples  
ring us now on 01-965 6551

Molehaven Ltd 703 Tudor Estate Abbey Road, London NW10 7UW

0184



ZAF complete shopfitting systems,  
counters and showcases for the modern  
pharmacy at competitive prices.  
(N.P.A. AND NUMARK APPROVED)

**ZAF LIMITED,**  
Lillington Road North,  
Bulwell, Nottingham NG6 8HG  
Tel: 0602 753728 (10 lines). Telex: 377739

## CHEMIST IMPROVEMENT PLAN



FROM

**C**ounterpoint  
SHOPFITTINGS LIMITED

Involves:

**YOU — YOUR SHOP — YOUR  
SALES — YOUR PROFIT — YOUR  
STOCK — YOUR STAFF —  
YOUR CUSTOMERS —**

*NOT JUST OUR SHELVING AND  
OUR SALES*

**WE CARE ABOUT YOU AND  
YOUR BUSINESS CONTACT US  
NOW AND LET US IMPROVE  
YOUR BUSINESS**

**0442 40704 OR WRITE TO**

**FACTOR No.1 EBBERNS ROAD,  
APSLEY, HEMEL HEMPSTEAD,  
HERTFORDSHIRE.**

## YOU CAN MAKE WORTHWHILE PROFITS EVEN IN TODAY'S COMPETITIVE MARKET.

### Our clients' results prove it.

We've laid the foundation for new business growth and higher profits for many, many retail chemists throughout the length and breadth of the UK — from large cities to small towns and rural communities, from prosperous zones to high unemployment areas.

We've shown all kinds of retail chemists how to make the most profitable impact on their local market. We've designed and redesigned pharmacies that capture a bigger market share.

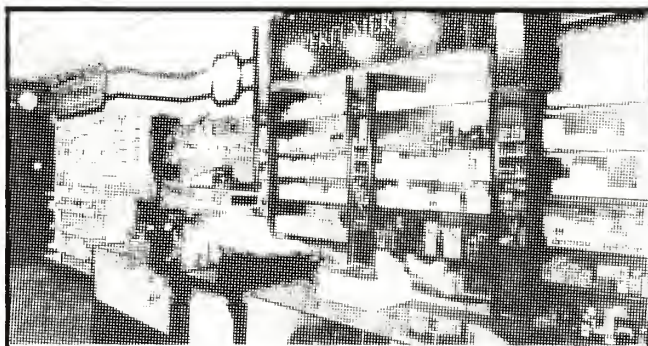
Apart from business success, what do Dollar Rae clients have in common? For one thing, they have all taken a serious objective look at their business. For another, they've allowed us to help identify, develop and present their strengths to achieve more effective market communication.

It's not a hit-or-miss exercise. It follows systematically from the Dollar Rae approach — analytical, painstaking, purposeful and creative. Our shops are designed for sales success — by professionals for professionals.

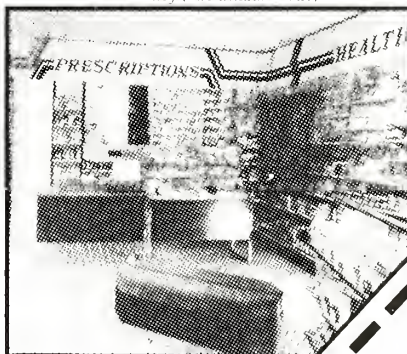
Our pharmacy track record says it all. If you're seeking more profitable pharmacy performance, can you afford to ignore it? To tap our knowledge and experience, send the completed coupon today for the Dollar Rae Retail Pharmacy Portfolio.

# Dollar Rae

*Creators of retail environments*



Victoria Pharmacy (Rickmansworth)



Demby & Bladon (Prestwich)

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_  
Dollar Rae Ltd  
11 Haggis Road Glasgow G11 4AR  
Telephone 041 441 9331  
Telex 771914  
(0184)

11 Haggis Road Glasgow G11 4AR Telephone 041 441 9331 Telex 771914

Leaders in retail pharmacy design and development throughout the United Kingdom



NOW WITH  
**£1 MILLION T.V.**  
ADVERTISING SUPPORT

# Pain relief that is built to last

Good news for those of your customers for whom pain is part of everyday life. Many could benefit from the anti-inflammatory power of aspirin, power that paracetamol cannot offer, if it were not for the potential effects of aspirin on the gastric mucosa.

New Duralin provides up to six hours' relief from pain and inflammation. Yet each two-tablet dose contains, in addition to 1000mg aspirin, 450mg of antacid. This not only speeds absorption but also reduces acidity, making Duralin kinder to the stomach than plain aspirin.

New Duralin has been developed by Bristol-Myers, one of the world's top ten pharmaceutical companies. Duralin comes in solid dose form (tablets and capsules) because research shows that that's what your customers prefer.

Duralin is a new dimension in long-lasting pain relief to add to your armoury. Bristol-Myers will ensure that your customers are made aware of where the enduring power of Duralin can be found: in their local pharmacy.



New  
Extra Strength <sup>\*</sup>  
**Duralin**



**BRISTOL-MYERS PHARMACARE\***

Bristol-Myers Pharmacare, Bristol-Myers Pharmaceuticals, a division of Bristol-Myers Co. Ltd.  
Station Road, Langley, Slough SL3 6EB

\* Trademark. Authorised User Bristol-Myers Co. Ltd. ©1985 Bristol-Myers Co. Ltd. DUR 02



